

**EVALUATING THE EFFECTIVENESS
OF DRUG COURTS IN IDAHO**

REPORT TO

GOVERNOR DIRK KEMPTHORNE

AND

**THE FIRST REGULAR SESSION OF
THE 57TH IDAHO LEGISLATURE**



**IDAHO SUPREME COURT
January 6, 2003**

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2002 REPORT EVALUATING THE EFFECTIVENESS OF DRUG COURTS

The Legislature enacted the Idaho Drug Court Act effective July 1, 2001 to expand drug courts to each of Idaho's seven judicial districts and appropriated funding to support the expansion of drug courts. The legislative intent of this act as stated in I. C. 19-5602 was

. . . to reduce the overcrowding of jails and prisons, reduce alcohol and drug abuse and dependency among criminal and juvenile offenders, hold offenders accountable, reduce recidivism, and to promote effective interaction and use of resources among the courts, justice system personnel, and community agencies

As of December 2002, thirty drug courts are operating in all judicial districts. Thirteen drug courts have been added just in the last twelve months, and the number of offenders supervised as of October 2002 was 627 participants, which is an increase of 62 percent from a year ago.

DRUG COURT ELIGIBILITY. Drug courts in each county determine the eligibility of offenders who may be admitted into drug courts following a substance abuse assessment and a criminogenic risk assessment. Pursuant to I. C. 19-5604, violent offenders and sex offenders are excluded. Data from two districts describe the "typical" drug court offender at entry into felony drug court as follows:

- About 32 years old
- More than 15 years of addiction
- Used \$136.26 worth of drugs each day
- More than likely unemployed
- Did not graduate from high school
- Probably convicted of possession of methamphetamine
- Assessed as being medium-to-high risk to re-offend
- Likely to go to prison without drug court

While accurately describing a drug court participant, it is important to look beyond averages. Drug court participants may be either men or women (45% are female), or even teens. The oldest drug court participant in Ada County is 56 years old and 24% have some level of college education. Many are parents, and in Ada County alone, there have been nine drug-free babies born to participants, each at an estimated cost savings of \$250,000 in the first-year-of-life medical care to \$750,000 over the child's lifetime. Just the nine drug-free births in Ada County will have saved an estimated \$6,750,000 for Idaho taxpayers.

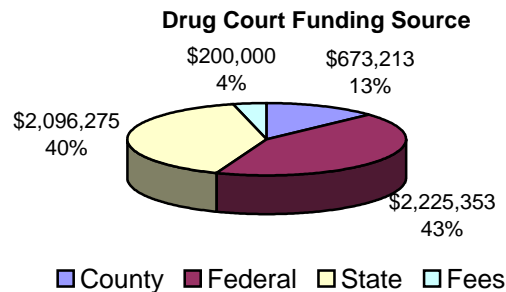
In addition, successful drug court participants are more likely to: Stay drug free during their time in drug court; become employed as a condition of drug court; and return to improve or complete their education

A drug court graduates' income is likely to increase by nearly \$11,000 per year - and they will pay taxes. They are highly unlikely to be convicted of a further offense, with only 11% of

EXECUTIVE SUMMARY

graduates, according to Ada County data, having been convicted of a further felony or misdemeanor.

DRUG COURT FUNDING. In 2002, state funding for drug courts totaled \$2,096,275 (after permanent reductions and holdbacks), which is 40% of all drug court funding. This includes reduced staffing and drug testing dollars for drug courts in the Supreme Court's budget, and funds appropriated to Department of Health and Welfare for drug court treatment, along with existing substance abuse treatment funds set aside for this purpose. It does not include judge time, probation supervision, or other related costs. To provide a greater number of community-based interventions through drug courts, federal funds have been aggressively sought by district courts and by the Supreme Court. In the current fiscal year, federal funds account for 43% of the drug courts' funding. Counties have also contributed at least 13%, totaling \$673,213 toward drug court operations. The drug court participants, themselves, are projected to pay at least \$200,000 in drug court fees or 4% of the total budget.



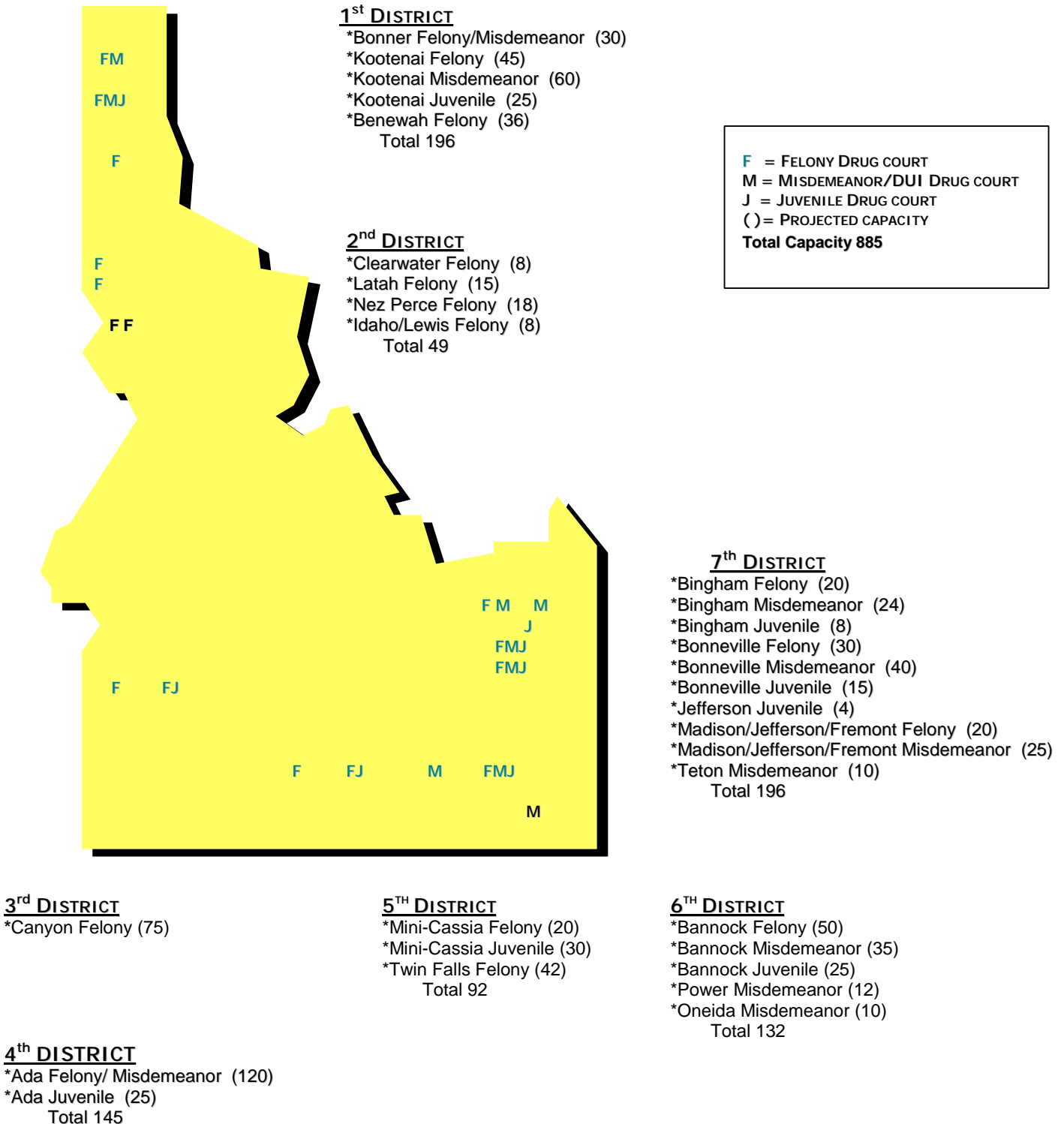
National research has shown that investing funds in drug courts will return from \$2.50 to over \$10.00 for each dollar spent. This means a potential savings for the state; in reduced incarceration and related criminal justice system costs, ranging from \$5.2 million to \$20.9 million, not including county-related savings.

ACCOMPLISHMENTS. In 2002 Idaho's Drug Court Coordinating Committee focused on bringing the new drug courts up to full operational status and building statewide support systems. State substance abuse treatment allocations were made to districts totaling \$1,787,525 and contracts were implemented to pay for treatment services. Drug court treatment is provided by state certified providers, with most of the providers being a part of the statewide treatment network administered by the Department of Health and Welfare. However because there is flexibility in the system, pilot contract development has taken place in some districts, which may pave the way for new statewide practices and reduce treatment costs.

The following map indicates where drug courts are located throughout the state, the type of drug court, and the projected capacity of the drug court if staffing, treatment, and drug testing funds are available. The estimated maximum capacity of the existing drug courts is 885 offenders statewide, again if funding is available.

2002 IDAHO DRUG COURTS

(WITH PROJECTED CAPACITY LEVELS
NOTED IN PARENTHESIS)



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DRUG COURT OPERATIONS. A statewide management information system has been developed as part of ISTARS and is being installed in all drug courts throughout the state. The fifteen drug courts now using the ISTARS drug court module enjoy more efficient management and participant tracking functions, with increased accountability and evaluation capability. Dr. Ed Latessa, of the University of Cincinnati, is conducting a three-year evaluation study of the effectiveness of drug courts.. The first phase of the evaluation will assess outcomes achieved by the two oldest Idaho drug courts operating in Kootenai and Ada Counties for over four years, and will be available in January 2003.

The statewide Drug Court Coordinating Committee, chaired by Justice Daniel T. Eismann, allocated available funding for the drug courts, approved pilot projects to test juvenile drug courts, adopted the LSI-R to assess criminogenic risk and needs in drug court applicants, created working groups to develop statewide policy and program evaluation guidelines, and reviewed procedures for transfer of cases among drug courts. The coordinating committee also reviewed procedures for complying with federal confidentiality regulations and is reviewing the critical need for mental health services among drug court participants.

Drug Courts require intensive teamwork at both the state and county level, including close collaboration of state agencies, particularly the Department of Health and Welfare, Departments of Correction and Juvenile Corrections, and the Idaho State Police. In the District Courts, there are currently 30 district and magistrate judges who lead drug court teams as follows:

1ST DISTRICT	DRUG COURT JUDGES
Kootenai Co. DUI	Lawyer ProTem Judges Scot Nass, Susan Weeks, Joel Hazel, and Susan Servick
Kootenai Co. Juvenile	Judge Eugene Marano Judge Benjamin Simpson
Kootenai Co. Felony	Judge Eugene Marano
Benewah Co. Felony	Judge Patrick McFadden
Bonner Co. Felony	Judge Barbara Buchanan Judge Debra Heise
2ND DISTRICT	
Idaho/Lewis, Nez Perce, and Clearwater Co. Felony	Judge George Reinhardt Judge John Bradbury (2003)
Latah Co. Felony	Judge John Stegner
3RD DISTRICT	
Canyon Co. Felony	Senior Judge Gerald Weston Judge Gregory Culet
4TH DISTRICT	
Ada Co. Juvenile	Judge John Vehlowl Judge Charles Hay (2003)
Ada Co. Felony	Judge Ronald Wilper
Elmore Co. Misdemeanor	Judge David Epis (2003)
5TH DISTRICT	
5 th District Felony	Judge Monte Carlson
Mini-Cassia Co. Juvenile	Judge Larry Duff

6TH DISTRICT	
Bannock Co. Felony	Judge Randy Smith
Bannock Co. DUI	Judge Dan McDougall
Bannock Co. Juvenile	Judge Brian Murray
Power Co. Misdemeanor/DUI	Judge Mark Beebe
Oneida Co. DUI	Judge David Evans
7TH DISTRICT	
Bonneville Co. Felony	Judge Greg Anderson
Bonneville Co. Misdemeanor	Judge William Hollerich Judge Keith Walker
Bonneville Co. Juvenile	Judge Jerry Meyers
Bingham Co. Felony	Judge Jon Shindurling Judge Greg Anderson
Bingham Co. Misdemeanor	Judge Ryan Boyer
Bingham Co. Juvenile	Judge Ryan Boyer
Madison, Fremont, Teton, and Jefferson Co. Felony	Judge Brent Moss
Madison, Fremont, Teton, and Jefferson Co. Misdemeanor	Judge Keith Walker Judge William Hollerich Judge Colin Luke
Madison, Fremont, Teton, and Jefferson Co. Juvenile	Judge Michael Kennedy Judge Colin Luke

Drug court teams work together to manage the drug court and plan each offender's treatment, as well as, guide the sanctions and incentives for compliance with rigorous drug court requirements. Teams consist of:

- Prosecutors
- Defense Attorneys
- Drug Court Coordinators
- Probation Officers
- Treatment Providers

This teamwork requires that all members are well-trained in drug court operations. Idaho drug court teams have participated in several trainings, both at the national level and in Idaho.

The Supreme Court conducted the first Idaho Drug Court Institute in Idaho Falls in September 2002, with Federal grant funds obtained. The Institute provided comprehensive training for the teams from every drug court on best practices for managing drug courts and on working effectively with offenders.

DRUG COURT INNOVATIONS AND CHALLENGES. Idaho drug courts have designed numerous innovative practices and projects, including:

- Transitional Housing
- Residential Treatment
- Juvenile Drug Courts
- New Treatment Contracts and Reduced Treatment Costs
- Family Reconciliation Groups
- Drug Court Alumni Groups
- Child Protection and Mental Health Courts
- Not for Profit Entities

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All across the state, community businesses and organizations have stepped forward to augment government resources. Their contributions have helped make drug courts successful and helped participants to become contributing citizens to society, living drug-free and crime-free lives, graduating successfully from the Drug Court program.

Drug courts in Idaho face several challenges as funding reductions in FY2003 have stretched the drug courts' ability to maintain their operations. It has been difficult to provide the necessary level of coordination of activities within the drug courts since funding for some administrative support has been eliminated. Operating resources are at the barest minimum and are insufficient in some districts to support adequate office support, travel, or training. Treatment resources fall short of allowing judges to use drug court for all eligible and appropriate defendants. Federal grants have allowed both the expansion and the demonstration of effectiveness of drug courts in Idaho, but there is concern that while they account for 43% of the drug court revenues, they are only temporary funds. Idaho drug courts must provide effective treatment, use research-based practices, and maintain qualified staff in order to achieve the desired outcome for offenders and meet Legislative intent to reduce escalating prison and jail costs. Development of further cost-benefit analyses is an important goal for the coming year, to assure that the investment in Idaho drug courts is achieving the return anticipated in reduced recidivism, incarceration, and the revolving door of crime. However, it is clear that maintaining a defendant in drug court is far more cost effective than incarcerating the same defendant in prison.

Despite the challenges and the reduced resources, drug courts remain a positive and cost-effective effort, an effort all three branches of government, Idaho policymakers, and citizens can be proud of. As one drug court judge recently observed "Drug courts are the most rewarding thing I have been involved in during my twenty years on the bench".

The complete Report on the Effectiveness of Drug Courts is on the Supreme Court website at www2.state.id.us/judicial. If you have any questions or need additional information, please contact:

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I. INTRODUCTION AND OVERVIEW

The National Drug Court Movement.

The drug court movement is young. It began in Miami Florida, with the Dade County Drug Court, in 1989. This burgeoning movement first developed in response to the growing number of drug cases overcrowding America's criminal court calendars. The drug court offers mostly drug offenders the choice of participating in an intensive court-monitored treatment program as an alternative to the usual court adjudication process.

Drug Court is a rigorous regimen and includes participation in group and individual counseling, educational sessions, attendance at self-help support groups such as Alcoholics or Narcotics Anonymous, reading and writing assignments, community service, drug-use testing, employment and regular appearances in front of the drug court judge. Failure to adhere to the treatment requirements and expectations results in the assessment of sanctions including jail time, additional educational assignments, work details, or community service. Participants move from more to less intensive phases of treatment during their drug court participation. Graduation comes when the participant has lived alcohol / drug and crime-free for a significant period of time and has reestablished a productive and contributing lifestyle.

According to James Nolan, author of *Reinventing Justice*, the "innovative adjudication model draws heavily on the American therapeutic idiom to give direction and meaning to its philosophy, forms and procedures" (Nolan, 1998). The model has received almost uniformly positive media coverage and overwhelming public support at both the national and local levels. Judges celebrate the drug court as an exciting movement, a new way of justice, even revolution in American jurisprudence. (Nolan, 2001.)

History of Idaho Drug Courts.

To address the growing court calendars of drug-related cases, and to slow, or stop, the revolving door of drug dependent defendants entering Idaho courts and Idaho prisons, the Judiciary made expansion of drug courts its number one priority, in the 2000 legislative session. Concurrently, the Governor, faced with requests from the Department of Correction for major funding for new prison construction, developed a programmatic and budget package to carry out a major statewide substance abuse treatment initiative. This initiative included funds to expand treatment for drug court participants. Against this backdrop of recommendations from the executive and judicial branches, the 56th Idaho Legislature took historic action and enacted Senate Bills 1171, 1257, and 1267, a coordinated set of bills enabling the Supreme Court, the Department of Correction, and the Department of Health and Welfare to expand substance abuse treatment for criminal offenders to halt the alarming growth of drug related crimes. Senate Bill 1171 established a statutory framework for the expansion of drug courts to all judicial districts and addressed eligibility, evaluation, implementation, funding, and participant fees. Senate Bill 1257 provided \$576,000 to the Department of Health and Welfare to support the treatment needs of the drug courts, while Senate Bill 1267 appropriated \$991,000 to address critical operating expenses of drug courts. All three branches of government articulated a common vision and initiated a strategic investment clearly designed to reduce the devastating and degrading impact of drugs on individuals, families, and communities, across Idaho.

This funding became available July 1, 2001 and by December 31, 2001 there were seventeen drug courts in operation. Eleven more drug courts began operating between January 1, 2002 and March 31, 2002. Two additional drug courts began operations during fiscal year 2003. As of December 31, 2002, thirty drug courts are in operation serving all Judicial Districts.

Idaho's Early Drug Courts.

Drug courts began in Idaho in September 1998, starting with the Kootenai County Drug Court under Judges James Judd and Eugene Marano followed soon, thereafter, by the Ada County Drug Court, under then Judge Daniel Eismann, in March 1999. These two early drug courts established solid operational foundations and demonstrated successful retention of clients in treatment and achievement of several positive outcomes. The Phase I Idaho Drug Court Evaluation report, discussed in a separate section, provides further detail on the evaluation of these two early Idaho drug courts.

Other Judicial Districts also began drug courts prior to the passage of SB 1171. In 2000, drug courts began in Bonneville, Bannock, Jefferson, Fremont, Madison, Power, Teton, and Twin Falls Counties. Just before the new law began, Bingham County started two drug courts, in early 2001. The early Idaho drug courts, through the vision and personal commitment of their judges, the collective efforts of their teams, including prosecutors, public defenders, treatment providers, and drug court coordinators, and the funding acumen of their trial court administrators, built a solid foundation of operational success and public support, paving the way to statewide drug court development and the passage of the Idaho Drug Court Act.

Legislative Intent for Idaho's Drug Courts.

The Statement of Purpose in Senate Bill 1171 articulates in part, ***“Drug courts lower jail and prison overcrowding by reducing the incidence of drug use and addiction and other crimes committed as a result of drug abuse and addiction. Drug Courts also reduce costs associated with criminal processing, incarceration, and recidivism.”*** In addition the legislation directs that ***“drug courts integrate drug treatment with case processing and require eligible defendants to be assessed, closely monitored, and tested during an intensive period of court supervision as an alternative to incarceration.”***

II. THE IDAHO DRUG COURT SYSTEM

Location, Type and Capacity of Idaho Drug Courts.

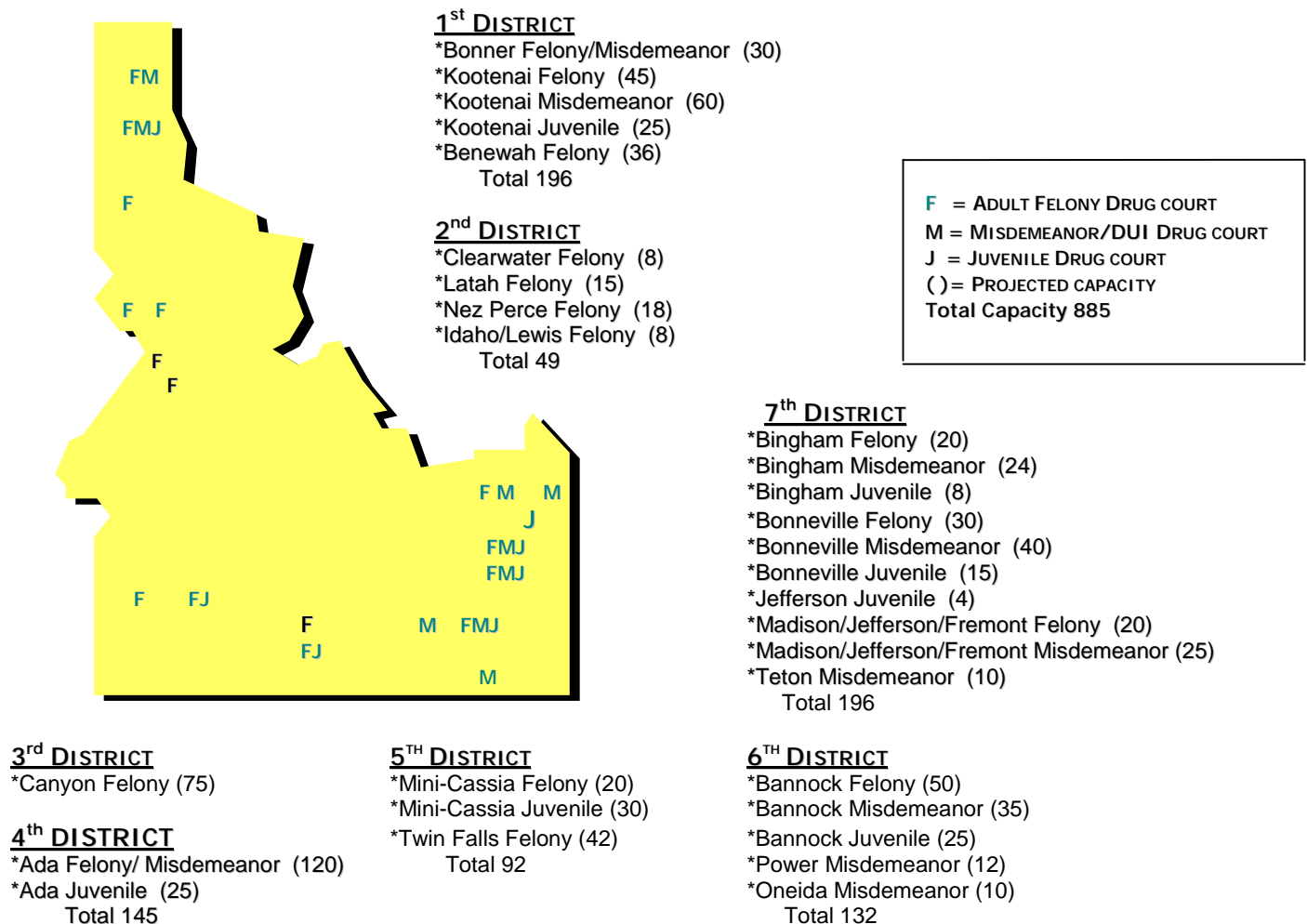
The map that follows (**Figure 1.**) details the court type, the location and the projected participant capacity (the number of participants that can be admitted at any given time) for each of Idaho's thirty currently operating drug courts. The numbers and locations are shown as of December 31, 2002. Drug courts now operate in every judicial district. Two additional drug courts are being considered for operation beginning 2003.

There are:

- 15 adult felony drug courts, with a projected capacity of: 537
- 8 Misdemeanor drug and/or DUI courts, with a projected capacity of: 216
- 7 juvenile drug courts, with a projected capacity of: 132
- Total projected capacity of: 885**

In addition, there is currently one operational Child Protection and Parent Drug Court and one Mental Health Court, both located in Bonneville County, in the 7th Judicial District.

2002 IDAHO DRUG COURTS (WITH PROJECTED CAPACITY LEVELS NOTED IN PARENTHESIS)



Idaho Drug Court Utilization.

The past year has been a caseload-building year for the newest Idaho Drug Courts, while the established drug courts have had a generally stable level of client offenders.

Figure 2. provides calendar-year 2002 participant data for each of the Idaho's operating drug courts, displaying the numbers as of October 31, 2002. There are two additional drug courts that were in the planning stage, and they are listed (with an asterisk) on the utilization report, as well. The drug court in Oneida County began in November, 2002 and Elmore County will begin in 2003. The information reflects current participants based upon whether substance abuse treatment is funded, primarily by the State of Idaho or Federal grant or other funds.

Figure 2.

Drug Court Participant Report as of October 2002					
District		# of Drug Courts	State Funded Participants	Grant Funded Participants	Total District Participants
District One	Benewah County/Felony		22		
	Bonner County/Felony/Misdemeanor		18		
	Kootenai County/Felony		32		
	Kootenai County/Juvenile		0		
	Kootenai County/Misdemeanor DUI			28	
	Total	5			100
District Two	Clearwater County/Felony		4		
	Idaho County/Lewis County/Felony		3		
	Latah County/Felony		10		
	Nez Perce County/Felony		8		
	Total	4			25
District Three	Canyon County/Felony		38		
	Total	1			38
District Four	Ada County/Felony			101	
	Ada County/Juvenile			16	
	Elmore County				
	Total	2			117
District Five	Mini-Cassia Minidoka County/Felony		23		
	Mini-Cassia Minidoka County/Juvenile		10	10	
	Twin Falls County/Felony		46		
	Total	3			89
District Six	Bannock County/Felony		21		
	Bannock County/Misdemeanor		21		
	Bannock County/Juvenile		33		
	Power County/Misdemeanor		15		
	Oneida County/Misdemeanor/DUI				
	Total	4			90
District Seven	Bingham County/Felony		17		
	Bingham County/Misdemeanor		23		
	Bingham County/Juvenile		7		
	Bonneville County/Felony		29		
	Bonneville County/Misdemeanor/DUI		36		
	Bonneville County/Juvenile		14		
	Madison/Jefferson/Fremont County/Felony		13		
	Madison/Jefferson/Fremont County/Misdemeanor		19		
	Jefferson County/Juvenile		3		
	Teton County/Misdemeanor		7		
	Total	10			168
	The 7th district contracted outside Health and Welfare's Substance Abuse Network at a lower rate which allows them to have more than the 120 participants allocated by state funds.				
Total Drug Courts / Participants		29	472	155	627
*	Pending Start-up Courts				

Characteristics of Drug Court Participants.

The Idaho Drug Court Evaluation will provide detailed data on the participants in drug courts, first in Ada and Kootenai Counties (2003), followed by data for all drug courts statewide (2004). Currently, available data from selected drug courts gives us a picture of the population being served. The most complete data comes from the Ada County Drug Court and reflects the participant population through October 2002.

In addition, a “snapshot” analysis of cases in Twin Falls County gives us data on the criminogenic risk scores of the felony drug court participants in that county as of October 2002. This data is important because it clearly shows that these drug court participants represent the target population of medium to high-risk participants. These participants are the individuals that the drug court is most likely to have an effect on, with respect to a reduction of criminal recidivism and commensurate return on the funding investment in the drug court.

Figure 3 provides data on District Four and Five participants.

Figure 3. Characteristics of Drug Court Participants

EDUCATION

- 37% lack high school diplomas or a GED
- 24% have some college level education
- 24% have an eleventh grade or lower education
- 23% of graduates from drug court have returned to school (GED or college)

DRUG USE AND DRUG CHARGES

- 15.46 years is the average number of years of drug use
- \$136.26 per day is the average daily street value of drugs used
- \$5.00 - \$1,800.00 was the recorded range of daily street value of drugs used
- 72% of participants were charged with possession of amphetamine / methamphetamine
- 6% of participants were charged with possession of heroin

GRADUATION AND CRIMINAL RECIDIVISM FROM DRUG COURT

- 52% of the Ada County participants who left the program, graduated from the program
- 11% of graduates have been convicted of new crimes

AGE

- 31.48 is the average age of participants
- 56 years of age is the oldest participant
- 64 % of participants are between the ages of 18 and 35
- 38 % of participants are between the ages of 21 and 30

GENDER

- 55% of drug court participants are male
- 45% of drug court participants are female

CRIMINALITY MEASURED BY RISK SCORE

89 % of drug court cases from Twin Falls County were assessed using the LSI-R as medium-to-high risk for their overall criminality and risk of future recidivism

EMPLOYMENT

- 59% of participants were unemployed at the time of entering drug court
- 86% of participants gained and maintained employment during drug court
- \$4.89 per hour represents the average hourly **wage rate increase** of graduates
- \$10,748.84 per year average **annual wage increase** for graduates

Funding for Idaho Drug Courts.

Funding to support Idaho Drug Courts is a composite of State, Federal and local government resources, and participant contributions.

The Drug Court appropriation for FY2003 was as follows:

Drug Court Coordinators	\$315,000
Drug Tests and Operations	\$297,500
Substance Abuse Treatment	\$576,000

In addition to these funds, the Department of Health and Welfare committed additional existing treatment funds of..... \$1,251,525 or a total of \$1,827,500 for substance abuse treatment for an estimated 525 drug court participants. Drug court participants receive treatment through funding managed by the Department of Health and Welfare, which is allocated to general community based treatment in addition to being allocated specifically to treat drug court participants.

The total state budget for drug courts in FY2003 began at\$2,440,025

However, the following cutback reductions were made early in FY2003:

Drug Court Coordinators	\$273,750*
Drug Tests and Operations	\$ 30,000*
Substance Abuse Treatment	\$ 40,000

Resulting in a total state funding level for FY03 of\$2,096,275

In addition, Federal grants from several sources also support Idaho Drug Courts. During FY2003, varied federal grants contributed the following:

Edward J. Byrne Memorial Grant Funding.....	\$588,562
Department of Justice Drug court Operations.....	\$883,782
National Highway Traffic Safety.....	\$ 23,129
Department of Health and Human Services.....	\$430,000
Department of Justice Statewide Enhancement.....	\$299,880

Total federal funding to support drug courts in 2003 equals.....\$2,225,353

(Note: This total excludes judge time, probation supervision, and other costs)

Local county funding to drug courts in 2003 is estimated at\$ 673,213 and includes funds for a variety of costs including match for Federal grants, operations support, and provision for clerical and coordinator personnel funding, depending on the specific county

In addition, participants pay drug court fees. The FY2003 estimate is....\$ 200,000

TOTAL.....\$5,194,841

* Drug court coordinators, some drug testing and operations paid in June 2002.

District Allocations of State Funds.

The Drug Court Coordinating Committee originally recommended, and the Supreme Court approved, allocations to each District based on an allocation formula. To arrive at budget allocation recommendations, the Drug Court Coordinating Committee made certain assumptions.

First, district requests for drug treatment costs varied per participant. To provide a consistent treatment regimen statewide, the committee agreed that the ASAM (American Society of Addiction Medicine) Treatment Placement and Level of Care Criteria would be followed to make placement decisions and determine the appropriate number of treatment hours. In addition, a model of phased treatment, identifying the ideal treatment elements, and the associated costs, was designed by a work group of drug court team members. However the cost of the “ideal” model exceeded available funding, so an average rate per slot, based on prior year utilization averages, was ultimately used to set a per slot allocation for overall budget and district allocation purposes.

Second, a decision was made that allocations would be continued to all Districts. Because of continuing grant funding and county funding commitments, Ada County Drug Court, did not request state funds. However, the committee felt it prudent to set aside some funds for future allocations. The 4th district allocation was the target for budget reductions to address revenue shortfalls.

Third, it remains the responsibility of the Administrative District Judge and Trial Court Administrator to determine where funds (slots) will be allocated, if there is more than one Drug Court in the District. However, the Executive Committee reaffirmed the drug court funding policy of prioritizing funds to adult drug courts with the exception of the 31 pilot project juvenile drug court slots and a one-time, one-year allocation of funds to District Seven juvenile drug court to match the federal grant received in 2002.

Allocation Formula and FY2003 Allocations to Districts.

The Drug Court Coordinating Committee’s original formula for the allocation of funds to the judicial districts is as follows:

District Population	25%
Drug Case Filings in each District	25%
Revenue, fees, grants, and how aggressively the district sought out other funds	25%
Pilot Programs	25%

It should be noted that for FY2003 the 25% in this formula representing the generation of other revenues and grants was actually allocated as an equal amount distributed “across the board” to each district.

Funding reductions applied to the original appropriation, to respond to continuing revenue shortfalls, were made as follows:

Funds for clerical support for Drug Court Coordinators were eliminated.

Funds for operating expenses for the coordination functions that are so critical to the operation of drug courts were reduced from \$13,500 to \$5,000 per district.

Treatment funding allocations to all districts, except District Four, remained at Fiscal Year 2002 levels, while the funds set aside for District Four treatment was reduced by \$40,000 to comply with the budget holdback. **Figure 4** provides a display of the District-by-District allocation of the final FY2003 state drug court funding level.

Figure 4. District Allocations of State Drug Court Funds for Operations and Treatment and Treatment Capacity

JUDICIAL DISTRICT	COORDINATION & OPERATIONS	DRUG TESTING	TREATMENT	FUNDED CAPACITY
First	\$50,000	\$31,000	\$215,822	62
Second	\$50,000	\$24,500	\$170,569	49
Third	\$50,000	\$37,500	\$261,075	75
Fourth	\$50,000	\$32,500	**\$186,265	65
Fifth	\$50,000	\$36,500	\$254,113	73
Sixth	\$50,000	\$39,500	\$274,999	79
Seventh	\$50,000	\$61,000	\$424,682	122
TOTAL	*\$350,000	\$262,500	**\$1,787,525	525
GRAND TOTAL				**\$2,400,025

* *Drug court Coordinators and operations paid in June 2002*

** *After budget holdback*

Drug Court and Substance Abuse Treatment Reimbursement Methods.

Drug court participants pay drug court fees, to assist in the financing of the program. These fees also cover a portion of their substance abuse treatment costs (5%). Drug court participant fees are set by Idaho Code § 31-3201(e), at no more than \$300.00 per month per participant, but drug court judges consider the financial ability of each drug court participant to pay and assess the participant fees, up to the maximum. The estimated total of drug court participant fees to be collected in FY2003 is \$200,000, based on collections of \$90,875 for the last six months of the prior fiscal year.

Because drug courts began during the middle of the state's treatment contract cycle, with its single statewide provider network, the flexibility needed to meet local treatment needs by drug courts in some regions of the state was difficult to accomplish. Thus, two substance abuse treatment options were permitted to drug courts. Treatment services may either be received from "network" treatment providers or from state approved "out-of-network" providers.

Network providers are treatment agencies that operate under subcontract to the State's single statewide treatment system. This system was selected through an RFP (Request for Proposals) and will be re-bid again in 2003. The Department of Health and Welfare currently compensates "in network" treatment providers for services delivered, at ninety-five (95) percent of their "contract" rate. As a response to state budget cuts, the treatment network administrator (Road to Recovery) negotiated reduced treatment reimbursement rates for FY2003.

Each District also has the option to arrange for services through out-of-network providers who are "approved" under state treatment facility standards. Using this option, the Seventh Judicial District conducted a Request for Proposals process for treatment services. The results demonstrated the desirability of a system where districts can arrange contracts designed to fit their needs and available community resources. As a result of this process, the District was able to negotiate contracts for treatment with significantly reduced group session rates, which allowed the available funds to serve additional participants. The treatment services provided under these contracts are reimbursed at a fixed monthly rate for a set of agreed upon services to an agreed upon maximum number of participants. In addition, the district has contracted separately for clinical quality assurance to provide continued clinical monitoring of the quality of services provided and the drug court coordinator monitors utilization of the treatment contracts. This experience may provide a design for changes in the next contract the Department of Health and Welfare develops for the treatment network.

Forging Partnerships.

The drug court is dependent upon effectively forging and sustaining a variety of program partnerships, providing for highly collaborative and coordinated services and operations. The drug court requires all participants to adopt new ways of carrying out their responsibilities. In this system, it might be fairly described that "everyone gets new shoes." Much as certain sports require special shoes to perform successfully, in drug court there is a new way of operating or "new shoes." Team members have to be willing to leave the "old shoes" at the door and work effectively together, while at the same time never relinquishing their unique roles. As explained in Ethical Considerations for Judges and Attorneys in Drug Court (Freeman-Wilson, 2001), "drug courts reshape the professional roles of judges and lawyers working in them. Judges, used to working in relative solitude, become part of a collaborative team that includes treatment providers, court personnel, and attorneys. Prosecutors and defense counsel learn to coordinate their efforts to achieve a participant's recovery from alcohol or drug addiction, muting their traditional adversarial relationship. In the courtroom, the typical lawyer-dominated hearing gives way to conversations between judge and defendant." Through this team process all the diverse team members are able to provide input to the judge's decisions.

The basic, and most critical partnership in the operation of the successful drug court is the ***Drug Court Team***. Each of Idaho's drug courts has a core team, comprised, at a minimum, of judge, drug court coordinator, prosecutor, defense counsel, and treatment provider. These teams are responsible for considering and providing input to every aspect of operation of the drug court and for advising on the development of the plan, services, incentives and sanctions and disposition of each and every case coming into the drug court. Teams meet weekly to review both new applicants and current participant compliance and progress. The team discusses effective court responses, to orchestrate the case processing, and to handle the myriad administrative and legal details that keep the drug court operating effectively and accountably. Decisions must reflect, over the long run, a consensus reached in the team about case handling and program operations. On many occasions "those drug court shoes pinch" but good conflict

resolution skills, along with development of interpersonal trust and confidence in the team's ability to communicate and share responsibility, keeps the program faithful to the dual mission of community protection and offender rehabilitation.

Interagency Collaboration.

Another level of partnership is the collaboration among agencies at both the community and the state level to integrate services and maximize resources to make the drug court program successful. In this collaboration a major guiding principle is continued focus on developing and operating the system in accordance with a national strategy, often referred to as "What Works Concepts and Principles." "What Works" articulates principles and practices found by research to be common to effective public safety and offender programming. "What Works" research has also identified the same offender attributes that "Criminogenic Risks and Needs" successful programs target. Through the combined efforts of the Supreme Court, the Department of Correction, and the Department of Health and Welfare, "What Works" national experts have trained agency personnel on how to implement these concepts in the partnerships among the agencies and respective branches of government.

Community Interagency Collaboration.

Collaboration includes:

- Provision of community supervision to drug court participants by the community supervision agencies, either County Misdemeanor Probation Services or the Idaho Department of Correction. In order to provide the necessary intense supervision of participants, the Department of Correction has committed one Probation Officer to support felony drug courts in every District. Probation Officers have become part of the drug court's planning for cases, and carry out supervision activities, including risk and needs assessment, home visits, drug testing, and on occasion, enforce sanctions such as electronic home monitoring or jail sanctions.
- The Department of Health and Welfare regions have participated in system planning, and in some cases, provide staff to be part of the drug court team. Health and Welfare has worked to determine how drug court participants can access services under the management of the department, including additional alcohol and drug treatment, mental health services, linkage with children and family services, income assistance, and child protection services. In addition, Regional Substance Abuse Authorities have grappled with the needs for community treatment for drug court participants, when the need outstrips the funded capacity.
- Local law enforcement have made contributions to the drug court program in several jurisdictions through their presence in drug court hearings, where they transport drug court applicants to drug court and take participants into custody when they are assessed jail sanctions, for non-compliance with program requirements. In addition, in some areas, local law enforcement provides urine drug testing and works with the drug court to facilitate jail sanctions, which continue to allow participants to attend treatment groups.
- In some communities the local job service agency has been a part of the broader drug court team, to assist participants to fulfill requirements to be employed and access job development resources. Vocational rehabilitation has also provided consultation to assist participants who need retraining or other vocational rehabilitation services.

- Major partners in most drug court operations are the local alcohol and drug treatment agencies who have worked to redesign treatment to address the needs of the drug court phased-treatment regimen, and to adapt to the accountability and communications requirements. Treatment providers also provide ongoing cross training to other team members about addiction and recovery.

State Level Interagency Collaboration.

- The Supreme Court has entered into an Inter-branch Agreement with the Department of Health and Welfare (DHW). DHW provides facility approval standards for drug court treatment providers and reimburses for treatment services provided by substance abuse treatment providers under contract with, or approved by, DHW. The Inter-branch Agreement also provides that DHW will provide for training for treatment providers in relevant assessment tools, offender treatment approaches, and the key components of drug courts, will facilitate appropriate communications between treatment and drug court teams, and will assure that treatment providers will participate in case staffing and court sessions.
- The Supreme Court is developing a Memorandum of Agreement with the Idaho Department of Correction (IDOC) Under this agreement IDOC will administer the Level of Service Inventory-Revised (LSI-R), a standardized and validated instrument that will assess the criminogenic risk and needs of drug court participants in multiple treatment domains and determine appropriate treatment. IDOC provides quality assurance oversight to the LSI-R administration to drug court participants and will provide training for misdemeanor probation staff, and others, who administer the LSI-R for non-felony drug court applicants. In addition, the Department of Correction has committed to provide a probation officer in each District to monitor or supervise participants and participate on the drug court team.
- The Supreme Court has worked with the Idaho State Police, Bureau of Criminal Identification to develop procedures to identify drug court as a disposition in the ILETs system, and the Bureau has provided important data for the recidivism study for the statewide drug court evaluation.

Idaho Drug Court Coordinating Committee.

The Idaho Drug Court Act requires the Supreme Court to establish a Drug Court Coordinating Committee. Supreme Court Justice Daniel Eismann serves as Chair of the Drug Court Coordinating Committee. The committee has representation from each judicial district consisting of judges, court administrators, drug court coordinators, prosecuting attorneys, public defenders, state and county probation officers, treatment providers, legislators, and drug court graduates and also includes representatives from key partner state agencies. The Coordinating Committee also has an executive committee that can make decisions when the full committee cannot meet. Drug Court Coordinating Committee membership, as well as, the membership of the Executive Committee is shown in **Figure 5**.

Figure 5. Drug Court Coordinating Committee

Executive Committee and Full Committee Membership
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Executive Committee

- ♦ Chair: Justice Daniel Eismann
- Senator Patti Anne Lodge
- Representative Gary Young
- Kathy Ruffalo – Governor’s Office
- Judge Brent Moss – 7th Judicial District - District Judge
- Judge Eugene Marano – 1st Judicial District - Magistrate Judge
- Patricia Tobias – Administrative Director of the Courts

Other Committee Members

<u>Judges</u>	Keith Walker	Ronald Wilper
	Gregory Culet	John Stegner
	Monte Carlson	Larry Duff
	Mark Beebe	
<u>Court Administrator</u>	Burt Butler	Trial Court Administrator
<u>Drug Court Coordinator(s)</u>	Marreen Baker	Ada County
	Tanya Gomez	Kootenai County
<u>Prosecuting Attorneys</u>	Pat Owen	Ada County
<u>SAPD/Public Defenders</u>	Molly Huskey	State Public Defender
	Scott Fouser	Canyon County
<u>State & County Probation Officers</u>	Rudy Evenson	Dept. of Correction
	Val Gardner	Bonneville County
<u>Regional Sub. Abuse Authority</u>	Barry Jones	Oneida County
<u>Treatment Providers</u>	Liz Lovell/Dir.	Bannock County
	John Southworth	Ada County
<u>Department of Correction</u>	Mike Rothwell	State
<u>Department of Education</u>	Barbara Case/Dir.	BSU
<u>Commission of Pardons and Parole</u>	Olivia Craven	State
<u>Department of Health and Welfare</u>	Pharis Stanger	State
	Nick Arambarri	Region VI
<u>Department of Juvenile Correction</u>	Paul Carrol	State
<u>Idaho State Police</u>	Roberta Silva	State
<u>Idaho Transportation Department</u>	JoAnn Moore	State
<u>Law Enforcement Officers</u>	Lorin Nielsen	Bannock County
<u>Mental Health Professionals</u>	Libby Engebrecht	Terry Reilly Health Ctr.
<u>Clerk of the District Court</u>	Noel Hales	Canyon County
<u>Drug Court Graduate(s)</u>	Brian Curry	Graduate
<u>County Commissioner</u>	Valerie Hoybjerg	Power County
<u>Legislative Services Office</u>	Cathy Holland-Smith	State

The charge of the Drug Court Coordinating Committee is to establish a drug court implementation plan and oversee ongoing drug court programs. The implementation plan

includes a strategy to forge partnerships among drug courts, public agencies, and community-based organizations to enhance drug court effectiveness. The committee is also charged with the responsibility to develop guidelines for drug courts addressing eligibility, identification and screening, assessment, treatment and treatment providers, case management and supervision, and evaluation.

The coordinating committee is also required to solicit specific drug court plans, and recommend funding priorities and decisions per judicial district; pursue all available alternate funding; provide technical assistance, develop procedural manuals, and schedule training opportunities for the drug court teams; design an evaluation strategy, including participation in the statewide substance abuse evaluation plan; and design an automated Drug Court management information system, which promotes information sharing with other entities.

Drug Court Coordinating Committee Actions.

The Drug Court Coordinating Committee met on May 30, 2002, September 10, 2002, and December 13, 2002. These full committee meetings were further augmented through Executive Committee work throughout the year, to provide coordination, oversight, and direction to the work of drug courts statewide. Areas of consideration and action included:

- Approval of statewide treatment slot allocations and related rates.
- Establishment of the funding allocation formula and approval of actual allocations to districts.
- Consideration of allocations to pilot projects for juvenile drug courts.
- Planning and implementation of a statewide Management Information System.
- Adoption and implementation of use of the Level of Service Inventory-Revised as the instrument to assess criminogenic risk and need to target appropriate offenders for drug court.
- Consideration of procedures to assure compliance with federal confidentiality regulations.
- Creation of workgroups to develop a Statewide Policy and Program Evaluation Manual and a Drug Court Judges Handbook.
- Consideration of the issue of transfer of cases from one district to another and appointment of a workgroup to develop a policy and procedures to guide such transfers.
- Discussion of the needs among drug court participants for mental health services and appointment of a workgroup to review the prevalence of mental illness and mental health issues affecting drug courts' participants and identification of needed services and available resources.
- Designation of November 10-16, 2002 as statewide Drug Court Awareness Week. (**Appendix D.** Order recognizing Idaho Drug Court Week.)
- Provided guidance and oversight to a statewide evaluation of effectiveness of drug courts in Idaho to commence in 2002 and conclude in 2004.

Statewide Drug Court Coordinator.

In June 2002, Ms. Norma D. Jaeger was appointed as Statewide Drug Court Coordinator. She previously worked for the Idaho Department of Correction, as interim Chief of the Bureau of Offender Programs and as Coordinator of Programs Quality Assurance. In addition, Ms. Jaeger has extensive experience in management of public substance abuse prevention and treatment

systems in north Idaho, Multnomah County (Portland) Oregon and King County (Seattle) Washington and has managed several offender treatment projects.

The Catalyst - Idaho Drug-Court Judges.

The work of the drug court is carried out by the drug court team, with support from the Drug court Coordinator. Effective teamwork is essential to an effective drug court. But the catalyst, as in a chemical reaction, is the drug court judge. Without the catalyst there is no reaction among the other ingredients. Indeed, continuing judicial interaction with each drug court participant is one of the key components of the drug court. In addition, another key component, “a coordinated strategy to respond to participant compliance” falls primarily to the drug court judge to facilitate, broker and occasionally mediate. The judge is the team leader and the team captain. In the courtroom, the judge is the leading actor in the drama that is drug court. The perception of the judge’s concern, fairness, but insistence on compliance, is a significant element reported by drug court participants when they describe the success of the program in their lives. Idaho’s drug court judges participate in the program entirely voluntarily and assume a significantly increased workload as a result. However, they also report that the drug court work is highly rewarding and worth the additional effort. As explained in *Community Justice in Rural America* (Dickey, 2002), “. . . judges are key sources of energy for community justice, given the breadth of their judicial experience, their strong feeling of connection to and responsibility for the people in their respective counties, their belief that progress is possible, and their willingness to gather people to solve local problems.” **Figure 6** identifies Idaho’s current drug court judges.

Figure 6. Idaho Drug-Court Judges

1ST DISTRICT DRUG COURTS	DRUG COURT JUDGES
Kootenai County DUI	Lawyer ProTem Judges Scot Nass, Susan Weeks, Joel Hazel, and Susan Servick
Kootenai County Juvenile	Judge Eugene Marano Judge Benjamin Simpson
Kootenai County Felony	Judge Eugene Marano
Benewah County Felony	Judge Patrick McFadden
Bonner County Felony	Judge Barbara Buchanan Judge Debra Heise
2ND DISTRICT DRUG COURTS	
Idaho/Lewis, Nez Perce, and Clearwater Counties Felony	Judge George Reinhardt Judge John Bradbury (2003)
Latah County Felony	Judge John Stegner
3RD DISTRICT DRUG COURTS	
Canyon County Felony	Senior Judge Gerald Weston Judge Gregory Culet
4TH DISTRICT DRUG COURTS	
Ada County Juvenile	Judge John Vehlow Judge Charles Hay (2003)
Ada County Felony	Judge Ronald Wilper
Elmore County Misdemeanor	Judge David Epis (2003)

5TH DISTRICT DRUG COURTS	
5 th District Adult Felony	Judge Monte Carlson
Mini-Cassia Juvenile	Judge Larry Duff
6TH DISTRICT DRUG COURTS	
Bannock County Felony	Judge Randy Smith
Bannock County DUI	Judge Dan McDougall
Bannock County Juvenile	Judge Brian Murray
Power County Misdemeanor/DUI	Judge Mark Beebe
Oneida County DUI	Judge David Evans
7TH DISTRICT DRUG COURTS	
Bonneville County Felony	Judge Greg Anderson
Bonneville County Misdemeanor	Judge William Hollerich Judge Keith Walker
Bonneville County Juvenile	Judge Jerry Meyers
Bingham County Felony	Judge Jon Shindurling Judge Gregory Anderson
Bingham County Misdemeanor	Judge Ryan Boyer
Bingham County Juvenile	Judge Ryan Boyer
Madison, Fremont, Teton, and Jefferson Counties Felony	Judge Brent Moss
Madison, Fremont, Teton, and Jefferson Counties Misdemeanor	Judge Keith Walker Judge William Hollerich Judge Colin Luke
Madison, Fremont, Teton, and Jefferson Counties Juvenile	Judge Michael Kennedy Judge Colin Luke

Local Drug Court Innovations.

While efforts are underway to develop statewide guidelines to allow evaluation of the extent to which all drug court programs operate consistently with research-based “best practices” and adhere to the critical drug court operating principles, there still remains significant opportunity and encouragement for local initiative. Districts regularly develop and test innovations to strengthen drug courts and achieve better outcomes. Following are some of the important local innovations that are being tried in individual districts. Through communication among districts, successful innovations can be disseminated to all districts for consideration.

Transitional Housing (District One Benewah County Drug Court).

Through a unique public – private, community partnership The Benewah County Drug Court has obtained exclusive use of a 6-unit apartment house for drug court participants. One of the apartments is rented to the substance abuse treatment counselor, who serves as building manager. Local churches and civic groups have provided funds to assist residents get established in the complex, which is of course, alcohol and drug free. Such alcohol-and-drug-free housing is a major need and most often not available for participants in drug court and contributes greatly to their efforts to establish clean and sober lives.

Residential Treatment (Districts Three, Six, and Seven Adult Felony Drug Courts).

A three-year, federal Center for Substance Abuse Treatment grant has been obtained to pilot and evaluate the impact of residential treatment for up-to-thirty drug court participants each year. This grant will enable a determination of whether access to residential treatment can enable some participants to graduate who otherwise would not be able to successfully complete drug court and, as a result, would have to go to prison.

Flat Rate Treatment Contracts (District Seven Felony and Misdemeanor Drug Courts).

District Seven issued a request for proposals and selected treatment providers who were willing to negotiate a flat-rate treatment contract, featuring lower group-treatment rates. Through this process, District Seven will be able to serve significantly more clients in the coming year and has demonstrated that flexibility in contracting may be an approach to reaching more participants with the existing limited resources. Providing such flexibility in contract development will be integrated into the statewide treatment contract RFP.

Family Reunification and Reconciliation Aftercare (District Three).

District Three has developed a structured aftercare component for participants in drug court to specifically address family reunification and or reconciliation. Drug court participants have frequently created major disruption in their families through their substance abuse/dependence and criminal involvement. Reconciling families as well as enabling them to play a constructive role in the participant’s life and recovery is an important part of helping the participant return to being a contributing member of the community. The aftercare component will become a part of the recently awarded Center for Substance Abuse Treatment grant project and will serve as a model of a family reunification element of aftercare across the state.

Mental Health Drug Court (District Seven - Bonneville County).

Because of limited availability of community mental health treatment, drug courts attempt to screen out prospective participants with significant mental health issues. However, through a close linkage with the Region VII Health and Welfare, Mental Health program's Assertive Community Treatment project, District Seven has implemented a demonstration "mental-health drug court." This court specifically addresses the needs of the mentally ill and substance dependent individual with a criminal charge. Using the same techniques of collaborative case staffing and planning, continuing frequent court appearances, and sanctions and incentives to reinforce desired behavior, the mental-health court works to keep mentally ill defendants out of jails, prison and hospitals, and living stable, crime free lives in the community.

Drug Court Alumni Group (District Four - Ada County Adult Felony Drug Court).

Ada County Drug Court has recently established an alumni group, drawing from its more than 150 drug court graduates. Alumni have organized this group, whose mission is to provide continuing support to drug court graduates in recovery, to carry out projects to support the Ada County Drug court program, including fund raising and public information, and to sponsor sober recreation and socialization activities. This group also facilitates the use of drug-court graduates in a mentoring program. Mentors encourage and support new drug court participants through the early phases of the treatment program.

District Seven Bingham County Drug Court Softball Team.

District Seven's Bingham County Misdemeanor Drug Court organized a softball team that competed with other teams in the community including the fire department and law enforcement team. Judge Ryan Boyer refereed several of the games. Following selected games there were picnics for team members and families, with food sponsored by local companies. Such pro-social and drug-free recreational activities model socially acceptable behavior and values and are very important to the life-changes designed for drug court participants.

Child Protection and Parent Drug Court (District Seven - Bonneville and Madison Counties).

With the passage of the Adoption and Safe Families Act, neglectful and abusing parents who lose custody of their children (frequently because of their alcohol or drug dependence) must be reconciled with their children within specified timelines or parental rights will be terminated. Using the methods of the drug court, the Seventh District is attempting to determine if families can be safely reunited and parents retained successfully in treatment through this organized and collaborative intervention.

Establishment of Not-For-Profit Corporate Structure.

District One has established a not-for-profit corporation, "Kootenai County Drug Court, Inc." in order to encourage and support local fund raising efforts that will increase available community support for the work of the drug court program, while providing tax deductions for contributors.

III. ACCOMPLISHMENTS and WORK IN PROGRESS

Statewide Implementation of the Idaho Drug Court Act.

The Idaho Drug Court Act envisioned drug courts operating in every judicial district, serving medium-to-high-risk offenders, matching criminogenic needs to a continuum of treatment services, and using the leverage of the court system to maintain program participation and accountability. State funds were appropriated to expand drug courts to each judicial district and combined with other funds, to supervise 525 individuals. By October 31, 2002, twenty-eight drug courts in Idaho operating in every judicial district were serving 627 participants through integrating the state funds with federal grants, local funds and participant fees. In addition, two new drug courts began admitting participants in November, 2002. **Figure 2.** provides a breakdown, by district, of all drug courts and the number of participants. The number of participants increased by approximately 62% from the beginning of 2002 to the end of October. This increase reflects start-up and steady movement toward full capacity by the eleven new drug courts that have begun operating in the state since January 1, 2002.

1. Strengthening Capacity Through Training

Because drug court requires the performance of new roles and the restructuring of old roles for all team members, significant initial training is needed in order to implement a new drug court. The high level of collaboration and coordination of services requires ongoing cross-disciplinary training. The commitment by public policy leadership in Idaho to utilizing research-based best practices drives continued review of the research and a commitment to continuing education for drug court-system professionals.

During the past year eight teams have participated in national drug court team training. The National Drug Court Institute, with funding from the Department of Justice, sponsors a series of three trainings through which a drug court team becomes educated on drug court processes, prepares to plan its program, and apply for federal implementation funding. Teams from all Idaho districts participated in this three-part training series during 2002.

In addition to the initial team training, drug court team members also participated in other national training during 2002, including Drug court Coordinator Training, and Substance Abuse Treatment Provider training.

In addition, through another federally funded initiative, Idaho received a statewide drug court enhancement grant that paid for the first Idaho Drug Court Institute, held September 11-13, 2002 in Idaho Falls. (**Appendix C.** contains the Institute Agenda.) This well-received and highly-rated educational program reinforced information provided through the initial team trainings and also exposed drug court team members to nationally known experts on substance abuse treatment, outcomes research, assessment and treatment planning, adolescent treatment, court operations, including research based uses of sanctions and incentives, and drug testing. This educational event also provided for many key community and state level stakeholders to gain greater knowledge and understanding of the drug court system.

Work in Progress includes:

- Drug court team members need continuing education and training in various aspects of effective drug court operation and drug court treatment methodologies. To meet this

need the Second Statewide Drug Court Institute, is being planned in collaboration with the Idaho Conference on Alcohol and Drug Dependency, to be held May 12–15, 2003 at Boise State University. Funding for this Institute will come from Federal Department of Justice and Center for Substance Abuse Treatment drug court grants.

- Many drug courts were fortunate enough to have their initial teams participate in national drug court team trainings, around the country. However, team members change over time and while it is critical that all team members be thoroughly educated in the drug court model, it is not possible for new members to receive the national training. Thus development and provision for drug court team training to new drug court members is a priority for the coming year.
- Drug Courts in Idaho are operating under the umbrella of a body of research work often referred to as “What Works.” This research has illuminated a number of important principles and approaches that hold promise of assuring that Idaho’s drug courts achieve the anticipated outcomes and reductions in criminal recidivism. To reinforce these research-based drug court elements, a team education and training package has been developed and was piloted in District Three. This training will be provided to teams statewide during the coming year.
- Idaho drug court teams have also requested assistance in “team building and teamwork-skill development” training, to facilitate effective and efficient team functioning. Because of the multidisciplinary nature of the drug court team, it is critical to develop problem solving and decision making skills and to assure that the team works in a collaborative and non-adversarial manner, while also assuring the ethical and professional issues of each of the participating disciplines are understood and respected in the process.

2. Management Information System

Expectations for drug courts to operate in an accountable and effective manner requires that there be a comprehensive management information system, capable of providing day to day client tracking functions and also management reports. The Drug Court Coordinating Committee determined that expanding the capability of an already existing trial court information system would insure that data definitions and collection would be consistent throughout the state. A Management Information System Design Committee, comprised of court clerks, judges, drug court coordinators, administrators and others with specialized expertise, developed guidelines that were used to develop a drug court management information module for the Idaho Statewide Trial Court Automated Records System (ISTARS). This is a statewide system used by Idaho courts to manage and track all court cases filed and calculate statistics for all court and case types in the state. It is an expanding and adaptable tool, or application, that is subject to ongoing growth and development as needs, rules, and standards change.

Justice Systems, Incorporated, completed the initial drug court MIS software application in May, 2002. District One, Kootenai County Drug Court conducted the initial testing and provided substantial invaluable input for refinements. The first installations of the system began in July 2002. A major presentation and training on features, functions and use of the system was given at the Idaho Drug Court Institute in Idaho Falls in September 2002. At the end of 2002, the system is available in fifteen drug courts. In addition to connectivity to ISTARS, the application

is also available to users for installation on an individual personal computer, so that it can be used in those jurisdictions not yet on the new ISTARS system. By the end of FY2003, the system is planned to be available to all drug courts.

Work in Progress includes:

The agenda for the coming year is to install the system on ISTARS, wherever available, and to install the application on freestanding computer systems across the state. In addition to installation, training in use of the system will be provided and a series of management reports will be developed.

Figure 7 shows the implementation goals and target dates for the drug-court management information module, system-wide.

Figure 7 Drug-Court Management Information System - Implementation Goals

ISTARS/DRUG COURT MIS/INSTALLATION DATES

Judicial District	County(s) Served	ISTARS or PC based	Target Date
First	Kootenai – Misdemeanor	ISTARS	Feb. 2003
	Kootenai – Felony	ISTARS	Installed
	Kootenai – Juvenile	ISTARS	Installed
	Benewah – Felony	PC Based	June 2003
	Bonner – Felony/Misdemeanor	PC Based	June 2003
Second	Clearwater – Felony	ISTARS	March 2003
	Idaho/Lewis – Felony	ISTARS	March 2003
	Latah – Felony	ISTARS	March 2003
	Nez Perce – Felony	ISTARS	Installed
Third	Canyon – Felony	ISTARS	Installed
Fourth	Ada – Felony/Misdemeanor	PC Based	Feb. 2003
	Ada – Juvenile	PC Based	April 2003
	Elmore – Not Operational	PC Based	June 2003
Fifth	Mini-Cassia Minidoka – Felony	ISTARS	Installed
	Mini-Cassia Minidoka – Juvenile	ISTARS	March 2003
	Twin Falls – Felony	ISTARS	Installed
Sixth	Bannock – Felony	ISTARS	Installed
	Bannock – Misdemeanor	ISTARS	Installed
	Bannock – Juvenile	ISTARS	March 2003
	Oneida – Misdemeanor/DUI	PC Based	March 2003
	Power – Misdemeanor	PC Based	March 2003

Seventh	Bingham – Felony	ISTARS	January 2003
	Bingham – Misdemeanor	ISTARS	January 2003
	Bingham – Juvenile	ISTARS	January 2003
	Bonneville – Felony	ISTARS	Installed
	Bonneville – Misdemeanor/DUI	ISTARS	Installed
	Bonneville – Juvenile	ISTARS	Installed
	Jefferson – Juvenile	ISTARS	Installed
	Madison/Jefferson/ Fremont – Felony/DUI	ISTARS	Installed
	Madison/Jefferson/ Fremont – Misdemeanor	ISTARS	Installed
	Teton – Misdemeanor	ISTARS	Installed

3. Residential and Aftercare Treatment Grant

The initial design of treatment for Idaho drug courts was based on use of outpatient treatment and almost no access is available for participants to receive residential treatment. Research has generally supported the efficacy of outpatient treatment when long-term outcomes of treatment completers are analyzed. However, this same body of research indicates that one of the main limitations of outpatient treatment is keeping people in treatment or “retention”. Participants who are unable to establish abstinence in an outpatient setting are unlikely to remain in treatment, and indeed, in drug court, such participants are likely to be terminated from the program or spend considerable time in jail, as a sanction. To determine if the addition of residential treatment could improve drug court retention and success rates, a grant was submitted to the federal Substance Abuse and Mental Health Services Administration, Center for Substance Abuse Treatment. In late 2002, the Idaho Supreme Court was notified that this grant was selected for funding. It will provide \$1,200,000 over a three-year period to provide for residential treatment for 90 individuals participating in felony drug court programs in Districts Three, Six, and Seven.

In addition, the funding awarded will also allow for the development and pilot-testing of a structured, cognitive behaviorally focused, aftercare component. Aftercare has clearly been demonstrated as an important element to achieve continued recovery and reduced recidivism but current funding levels in the Idaho drug court treatment system make provision of such aftercare difficult. In addition, there are no standards for such treatment nor are there current consistent models to assure that aftercare continues the most effective treatment approaches – namely cognitive behavioral treatment.

Work in Progress includes:

The major task in the coming year will be to implement the residential treatment component of the grant and then to develop and implement the aftercare component of this grant. In addition to the provision of treatment, the grant includes an evaluation component. The Evaluation includes collecting initial data, as well as 6 and 12-month follow-up data, on the participants and providing these data to the funding agency, as well as, incorporating the data into the Statewide Drug court Evaluation.

4. Statewide Evaluation – A Three-Year Project

The Idaho Supreme Court sought and was awarded a federal Office of Justice Programs grant to contract with an outside evaluator to analyze data from each court to report on key indicators of the success of Idaho's drug courts. This evaluation effort will allow Idaho drug courts to report on their success to the state legislature, as well as, other potential funding bodies. It will also allow the state to contribute to national evaluation data.

The Supreme Court contracted with the University of Cincinnati, Center for Criminal Justice Research, under the direction of Dr. Edward Latessa, to develop and implement a comprehensive evaluation report, including an assessment of the drug court's effectiveness in addressing the treatment needs of offenders and its impact on the court's caseload and prison population. The evaluation will provide three levels of information over a three-year time frame, as well as, set the stage for longer-term program evaluation.

Phase I of the Evaluation: A Process Evaluation: To assess drug court's effectiveness, it is first necessary to determine if the program is being implemented as designed. One of the primary purposes of the drug court is to reduce the amount of time it takes to process an offender through the court system and to get the offender actively involved in a treatment program. The following research questions will assist in understanding and evaluating policies and procedures for offender processing:

1. What are the characteristics of offenders and the offenses being referred to the drug court?
2. On average, how many days pass between the filing of initial charges and a guilty plea or other disposition for those offenders referred to the drug court?
3. On the average, how many days pass between an offender's disposition and participation in treatment?
4. How many offenders are being referred to the drug court per month? To each of the local treatment agencies?
5. Is the local drug court operating as designed, and if not why?

Impact Evaluation: The following questions will drive data collection and analysis for assessing the drug court's impact on the court dockets, prison population, and probation department.

Court Dockets

1. What impact has the drug court had on the average time lag between arraignment and disposition?
2. What impact has the drug court had on the number of trials for drug offenders?
3. What impact has the drug court had on the number of bench warrants issued for drug offenders?

4. What impact has the drug court had on the number of suppression hearings?
5. What impact has the drug court had on the number of drug probation violation hearings?

Prison Population

1. What impact has the drug court had on the number of days of pre-trial detainment for drug offenders?
2. What impact has the drug court had on the prison population?

Probation Department

1. What impact has the drug court had on the average caseload size per officer?
2. What impact has the drug court had on the rate of technical violations for drug offenders?

Outcome Evaluation: the final component of the evaluation will focus on the performance of the offenders who have participated in the drug court program. Specifically, the following questions will be addressed:

What are the completion rates of offenders who enter the drug court?
Are the drug courts effective in reducing recidivism?
Are the drug courts effective in reducing substance abuse?

Specific data elements to be collected include:

- average length of participation in treatment;
- rate of successful treatment completion;
- rate of positive urinalyses;
- number of technical violations;
- number and type of new arrests;
- number of participants completing the program and their dispositions;
- number of participants incarcerated (both jail and prison).

Data Collection: Three primary data collection instruments will be used:

1. An intake questionnaire will be designed to capture information on the offender's social history, criminal history, alcohol and drug assessment, criminogenic needs assessment, present offense (e.g., nature of offense, date of charge/arrest, date of plea, dates of incarceration) and case plan;
2. A quarterly supervision report will be designed to track information regarding each offender's probation supervision activities, treatment participation,

drug test results, employment status, payment of court fees, performance of community service, technical violations, and new arrests;

3. A case termination report will be designed to capture information regarding the type and nature of the termination, offender progress, employment and the treatment status of each offender.

Data will be gathered from several sources including the offenders themselves, jail records, pre-sentence reports, treatment agencies, probation officers, case files, and official record checks. Pre- and post-test instruments for offenders and interviews with program and court staff will be included within the evaluation design to assess offender change and perceptions regarding program operations and effectiveness. Data will also be collected on offenders who are screened but who do not participate in the Drug Court (along with corresponding reasons). As part of the evaluation services, University of Cincinnati will also assist the Drug Courts in developing and identifying comparison cases.

Quarterly summaries of the data will include a profile of drug court cases and program activities. The final report will include a description of the program, an overview of the evaluation design, a summary of findings, and recommendations. The data and results will be presented in text and graphic form. An executive summary of the final report will also be provided.

TIMELINES AND PLANS FOR the evaluation

(Items In Bold Have Been Accomplished)

12/31/2002

- **University of Cincinnati and Supreme Court: Redesign data collection forms to mirror new ISTARS database**
- **University of Cincinnati: Provide necessary assistance during the implementation phase of ISTARS database**
- **Supreme Court: Field database testing**
- **Supreme Court: Install and train staff on database**
- **University of Cincinnati: Identify comparison groups for all existing drug courts**
- **University of Cincinnati and Supreme Court: Compile data from the two existing drug courts (Ada County & Kootenai County), collect follow-up data, analyze data and prepare preliminary report**

12/31/2003

- University of Cincinnati: Profile offenders from all drug courts across the state
- A statewide report will include a detailed description of each drug court. For example, the report will detail basic demographic characteristics such as age, race, sex, marital status, education level, employment status, family history, criminal & drug use history and residential stability. In addition, the report will describe treatment needs presented by the clients, the services they received while in the drug court program, whether they received technical violations and the resulting sanctions imposed, and drug testing results. Finally, the report will summarize outcome findings such as graduation rates and completion of program requirements (e.g., fines, restitution, community service, etc.).
- University of Cincinnati: Identify significant differences between drug court participants and comparison cases

- The report will also analyze whether any differences exist between the drug court group and comparison group on many of the factors mentioned above. The comparison will allow us to make recommendations regarding target populations and treatment retention.

12/31/2004

- Supreme Court: Conduct follow-up on both drug court participants and comparison group members (e.g., arrests & convictions during a specified follow-up period determined by University of Cincinnati).
- University of Cincinnati: Analyze data
- Recidivism data will be entered and analyzed by University of Cincinnati staff and combined with data elements discussed above.
- University of Cincinnati: Evaluate effectiveness of drug courts
- The evaluation will utilize the data collected to answer (for example) whether a particular drug court is more effective with younger than older defendants or males versus females, or are participants with less than a high school education (not including juveniles) more or less likely to engage in future criminal behavior, are defendants who hold a full-time job more or less likely to engage in future criminal behavior, or are defendants who have a relatively stable residence more or less likely to engage in future criminal behavior.
- The analysis will explore outcome differences between drug court & comparison group members and attempt to isolate which factors predict success and failure. Specifically, to isolate whether certain factors (e.g., demographics, prior record, drug-use history) influence the likelihood of arrest. For example, are unemployed comparison group members more likely to fail than unemployed drug court participants?
- In addition, among drug court participants, outcome differences between graduates and dropouts will be explored. This will allow us to determine (1) who is most likely to drop out of the drug court programs and (2) which factors (demographics, substance abuse history and drug of choice, technical violation rates, etc.) are related to failure.

Report of Phase I of the Idaho Drug Court Evaluation

A separate document providing complete detail on the Statewide Phase I Evaluation, which looks at drug courts in Ada and Kootenai Counties, will be on the Supreme Court's home page, in January 2003. This independent evaluation report will provide detail on the clients served by these two, oldest Idaho drug courts and analyze recidivism data on participants, graduates and compare their outcomes to those of a matched comparison group. This will provide the first quantitative assessment of the outcomes of Idaho drug courts.

5. Statewide Program and Evaluation Guidelines

In order to assure the operations of drug courts in Idaho in accordance with best practices and to achieve the most favorable outcomes, the Idaho Drug Court Act mandated that the Statewide Drug Court Coordinating Committee establish statewide program and evaluation guidelines. Committee work has begun, along with reviewing national standards, that can inform development of these guidelines in Idaho and the evaluation research findings. Guidelines will be developed to address eligibility, identification and assessment, treatment and treatment providers, case management and supervision, and evaluation.

IV. CHALLENGES FACING DRUG COURTS IN IDAHO

Funding to Sustain and Grow the System: Managing Funding Reductions.

The State Courts in Idaho have, as has the rest of the public sector, struggled to maintain critical services during the past two years of economic challenge. State funding for drug courts was initially established at \$2,974,080. For FY2003, state funding was reduced to \$2,096,275, a reduction of \$877,805. The court system has been very mindful of the expressed Legislative intent, from the 2002 session, to preserve these fledgling drug courts and assure the availability of the drug court option in all seven districts.

Impact of Reductions in Funds.

Drug Courts have been maintained in all judicial districts, albeit with reduced funding. Support was reduced for district drug court coordination activities including funding for the Drug Court Coordinator positions and related operating funds. Funds for needed clerical support were eliminated. All state funding for travel to support the Statewide Coordinating Committee was cut and meetings have relied on distance teleconferencing technology. Treatment funding was reduced. The federal grant funds for treatment in the Fourth District, which have been picked up by Ada County for 2003, allowed other districts to be spared cuts to treatment funds. However, the current level of state funding, at \$2,096,275, while barely preserving the system, is challenged to meet the needs of the system over the longer term.

One challenge is to assure the necessary level of coordination of the drug courts multiple procedures and functions. Drug Court Coordinators in several districts hold multiple jobs, work only part-time, or manage multiple drug court teams across their district. They are expected to support the drug court team(s), provide client case management, oversee the randomization of drug testing, monitor the provision of treatment services, facilitate drug court team staffing and other client planning meetings, and work in the community to educate and foster support for the drug court. The current lack of clerical support in most districts has meant that evaluation data collection and other paperwork has fallen to the coordinators. This administrative function, while essential to the accountability of the drug courts, has had to compete with direct client contact and drug court team support. Many coordinators and their trial court administrators have reported that the lack of clerical support has been a major challenge to the efficient operation of their drug court during this year.

Continuation of the current reduced level of funding or further funding reductions will seriously compromise the maintenance of effective drug courts in every district.

Meeting the Growing Demand for Drug Court.

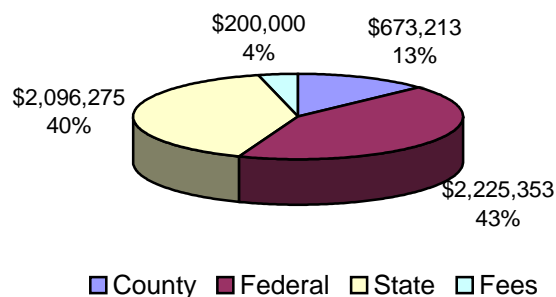
Equally challenging is for judges to have access to much needed sentencing alternatives for all defendants who would better be served in drug court. Drug court capacity in the state currently is between 525 and 855, with 525 being the number projected in the state funding appropriation. While the full extent of the need for drug court is not clear, there are reports from several districts of numbers of defendants being on “waiting lists” or simply being denied access to drug court and thus, being sentenced in routine fashion to a more costly and less effective sanction. In addition to currently targeted defendants, it is clear that the drug court model is useful for a wider variety of offenders than simply those charged with drug possession. Many offenders can be managed safely and constructively in the community and can be expected to recover from

active addiction and become law abiding and tax paying citizens, if only they can be engaged in and retained in treatment under the strict supervision of the drug court judge. Drug courts offer real promise in being able to accomplish this goal. With the increasing evidence of substantial savings resulting from the drug court investment, drug courts are poised to make a major contribution, when the current economic circumstances recover and allow for expansion. For this reason it is crucial to maintain the foundation in each district upon which to build an expanded system.

Replacing Federal Grants.

The current drug court system, statewide, is a composite of funding totaling \$5,194,841. State funds equal \$2,096,275 (40%) Federal funds, through the Department of Justice, Office of Highway Safety, and Center for Substance Abuse Treatment equal \$2,225,353 (43%). There are substantial contributions from the counties, estimated conservatively to be \$673,213 (13%) and a projected \$200,000 in drug court participant fees (4%). **Figure 8** indicate the funding sources for Idaho Drug Courts.

Figure 8. Drug Court Funding Source



The current federal funds have enabled several counties to implement and test drug courts, both for adults and for juveniles. In addition, federal funds are allowing the determination of the contribution that may be made by the addition of residential treatment and specialized aftercare, as well as, gender specific treatment for women. However, as the saying goes “all good things must end” and federal funds are currently critically important but ultimately temporary financing for significant elements of the statewide system. It is hoped that drug courts will demonstrate their cost effectiveness and that additional state funds can be accessed to continue the full continuum and distribution of services.

Extending the Model.

The drug court model began in 1989 as a method of dealing with the explosion of drug possession cases, and primarily as an approach to the “first offense” type of case. As the approach has demonstrated effectiveness with a wider range of drug involved offenders, the model has evolved to many different categories of offenses and problems - from adult courts to juvenile drug courts; from felony criminal cases to misdemeanor cases, such as driving under the influence of intoxicants; and even from criminal cases to civil cases, including child neglect and abuse. Drug courts have been adapted to tribal courts through the establishment of Tribal Wellness or Healing Drug Courts. In all of these adaptations, the ten key components can be found. These components provide the theoretical and practical underpinnings for alternative

case processing and the marriage of sanctions, incentives and treatment. (**Appendix A. Ten Key Components of Drug Courts.**)

Idaho has begun the following demonstrations or pilots of these adaptations.

- Mental Health Court (Bonneville County)
- Child Protection and Parent Drug Court (Bonneville County)
- DUI court (Bannock, Bingham, Bonneville, Fremont, Jefferson, Kootenai, Madison, Oneida, Power, Teton,)
- Juvenile Drug Court (Ada, Bannock, Bingham, Bonneville, Jefferson, Kootenai, Minidoka-Cassia)

Evaluation will ultimately determine their value but there is certainly optimism among the operating teams, as they see the positive impact in the lives of their fellow citizens.

Juvenile drug courts warrant special consideration and discussion. The Idaho Drug Court Act envisioned both juvenile and adult drug courts while available funding appropriated to implement drug courts initially has emphasized adult drug courts as a means to halt continued prison population growth pressure. The Statewide Drug Court Coordinating Committee authorized pilot projects of juvenile drug courts, allocating thirty slots for treatment of adolescents participating in drug court (Districts Five and Six). In addition, federal funds were received during FY2003 to support three juvenile drug courts (Districts One, Four, and Seven). Reaching young, drug involved offenders through an effective treatment-focused community alternative is very appealing. Costs in the juvenile system, whether for detention or commitment, are very high while community-based treatment can be provided at a much more reasonable cost. Further, research shows that community-delivered treatment is more effective over the long term than institutionally-based treatment.

There are special challenges to the juvenile drug court. Development of an effective partnership between the court system and the Department of Juvenile Corrections is a major development agenda for the coming year. Development of juvenile drug courts to serve as “reentry courts” is one promising approach to the critical transition back to the community for youthful offenders committed to the Department of Juvenile Corrections and served in state institutions.

A major challenge is effective intervention with and meaningful support to parents and other family members, whose own alcohol or other drug use can compromise treatment efforts. Idaho juvenile drug courts have developed innovative ways to reach families, including providing in-home treatment and court mandating parents to participate in drug court services, including drug testing, if drug use is suspected. Again, through collaborating with the Department of Juvenile Corrections, juvenile drug courts will explore the implementation of *Functional Family Therapy*, a research-based family intervention program. The potential pay-back from an investment in effective drug court participation for young offenders is obviously even greater than for adults, who have shorter tax paying and crime-free lives ahead of them. Finally, intervening in the life-wasting cycle of drug use and crime is unquestionably desirable. At the same time, the research base upon which to build effective juvenile drug courts is only beginning to be established and tested.

The Statewide Drug Court Coordinating Committee has established a work group to study and recommend strategies for funding and operating juvenile drug courts and to monitor the effectiveness of the existing seven juvenile drug court pilot efforts. The cooperation of and collaboration with a number of stakeholders and partners, particularly the Department of

Juvenile Corrections and county juvenile probation departments is critical to this effort and will be addressed in the months ahead.

Improving Treatment Outcomes and Implementing Best Practices.

Research and evaluation into the effectiveness of drug courts has clearly demonstrated that how services are provided makes a difference. It is also critical that treatment be targeted to those who are assessed as being at medium- and high-risk of recidivism. Intensive treatment, when delivered to low-risk offenders, has been shown to increase rates of recidivism. Research has demonstrated considerable difference in the effectiveness of different drug court programs. The type and quality of the treatment and the appropriate targeting of participants are major variables that affect outcomes.

During the coming year, the Idaho drug court system will begin assessment of the nature and type of treatment services provided to drug court participants. The evaluation literature is clear about the forms of treatment most likely to reduce recidivism among drug involved offenders. In addition, treatment effectiveness is substantially impacted by treatment retention. There are research-based strategies to improve retention and efforts will be made to increase the use of such strategies in the Idaho drug court treatment programs.

Recently, the National Drug Court Institute has begun training designed to improve the use of the sanctions and incentives, so that they are consistent with what research has shown to be most effective in changing behavior. This training provides guidance to judges and drug court teams in effectively using sanctions and rewards and will be an area for further attention in Idaho in the next year.

Developing an Idaho Drug Court Cost-Benefit Analysis.

As drug courts in Idaho make the case for continuation and expansion, it is essential to be able to assess and present the case for the cost savings to the taxpayer that can be demonstrated through the use of drug courts. In the past few years there have been cost- and benefit-assessment models developed that can be used to determine the financial impact from drug courts. Depending on the cost elements and the availability of data, these assessments have demonstrated returns on the drug court dollar invested of from \$2.50 to \$11 for each dollar of program cost. (Finigan, 1999.) During the coming year, an Idaho cost-benefit assessment model will be developed and the necessary data will be collected to provide a clear picture of the potential value of Idaho's drug court investment strategy.

V. A WIDER POINT OF VIEW: DRUG COURTS IN THE UNITED STATES – THE STATE OF THE ART

Drug Courts Nationally - The Big Picture.

As of May 2001, there were 688 drug courts in operation in the United States. These included:

- 483 adult drug courts
- 158 juvenile drug courts
- 38 family drug courts
- 9 combination adult/juvenile/family drug courts

An additional 432 drug courts were known to be in formal planning stages at the same time for a total of 1,120.

In 2001, Researcher Steven Belenko completed his third, critical review of the drug court effectiveness research. His findings in 2001 were generally consistent with earlier reviews of the research. Drug courts have achieved considerable local support and have provided intensive, long term treatment services to offenders with long histories of drug use and criminal justice contacts, previous treatment failures and high rates of health and social problems. Program completion rates are generally consistent with previous findings. The current group of evaluations presented a graduation rate range of 36% to 60% and an average of 47%. Drug use and criminal activity are relatively reduced while participants are in the program, with one of the studies showing half the rate of criminal offense for participants compared to those who left the program, and only half as many jail days for those in the program. Another evaluation showed significant reductions in arrest and incarceration during 12-month period of program participation compared to a 12-month period prior to program entry. Four of the six studies that examined one-year post program recidivism found a reduction. The size of the reduction varied across the courts. The primary drug of abuse varies across the country, with heroin predominating in the eastern United States and methamphetamine in much of the west and, increasingly, in the Midwest. Among juvenile drug courts marijuana and alcohol are the primary but not exclusive drugs of abuse. Drug court participants present with a variety of other health issues including from 20% to 46% needing mental health services, 13% to 20 % had histories of prior suicide attempts, from 15% to 38% of participants had histories of sexual abuse and from 31% to 56% had prior physical abuse. In one study 35% needed medical care and 30% had chronic health problems. Thus, these evaluation results reaffirm that, nationally, drug courts continue to serve serious, drug-involved offenders, who have multiple problems, who commit fewer crimes during participation in drug court, and, for many, but not all programs, these reductions in crime continue following program completion. In addition, several studies demonstrated that per-client costs for drug court participation are lower than for standard processing, because of lower incarceration costs. However, costs for low risk offenders may be lower in straight diversion programs with similar success rates. (Belenko, 2001) Another study reported cost benefit results of from two to ten dollars returned to taxpayers for each dollar invested in drug courts. (Finigan, 1999)

“What Works” in Drug Courts – the Research Guidance.

In a research article published in Corrections Management Quarterly, 2000, Johnson, Hubbard, and Latessa address key issues underlying drug court effectiveness. The article asserts that “if the drug court model hopes to achieve behavioral change through community-based treatment,

the program must use empirically validated and theoretically driven treatment models (Prendergast et al, 1995). Effective treatment should be based on behavioral approaches and use cognitive strategies, be located in the offenders natural environment, be multimodal, be intensive enough to be effective encompass rewards for pro-social behavior, target high-risk and high-criminogenic need individuals and be matched with the learning styles and abilities of the offender (Gendreau 1996). (**Appendix B.** Principles of Drug Addiction Treatment – National Institute on Drug Abuse.)

Drug courts should apply the following principles of effectiveness, principles that have been identified in the substantial body of research on correctional programs (Johnson et al, 2000).

- Participants should be assessed and classified according to their risk level, and intense services should be provided to the higher risk offenders. The same, intensive services provided to lower risk offenders are ineffective in reducing recidivism and, in some cases, actually increase recidivism.
- Risk and substance use should both be assessed with a standardized and validated instrument.
- The assessments should drive an individualized treatment plan based on the substance use severity and criminogenic needs identified in the assessments.
- Treatment provided should be behavioral and use offender specific cognitive strategies such as cognitive restructuring designed to address criminal or risk thinking and cognitive skills development including problem solving, anger management and conflict resolution.
- Treatment intensity should vary with risk and provide a minimum of 90 days of treatment, offering at least 100 hours of treatment over a three-to-four month period. (In the drug court program model, this phase of treatment may be understood as the second phase of the program).
- Aftercare services are critical to assure maintenance of gains made in treatment and to continue to address relapse issues (in the drug court context aftercare can generally be understood to be the third and fourth phase of drug court treatment).
- Aftercare, in this model assumes fairly frequent contact (one or more times a week) and may include home visits.
- Aftercare services should be determined through a reassessment of needs and individualized, based on the assessment.
- Structured relapse prevention strategies offer great promise.
- Treatment provided to drug court participants should be monitored in a structured and validated manner and providers held accountable to the principles of effective intervention and quality program operations.

Classification of Drug Courts.

Recent research conducted by the Rand Corporation has identified the criteria by which drug courts can be classified and, as a result, can be meaningfully compared. The Rand Study identified five criteria, which can be measured on a three-point scale (high, medium, or low). The criteria are:

- Leverage the seriousness of the consequences faced by participants who fail to meet program requirements and are discharged from the drug court
- Population the severity of the participants criminal involvement and drug use
- Severity

- Program Intensity minimum structured requirement for program completion including elements such as frequency of urine drug testing, frequency of court appearances, and required hours of treatment
- Predictability the degree to which participants know how the court will respond if they are compliant or non-compliant, such as, consistency of rewards and sanctions, time between noncompliance and response, and perceived predictability
- Rehabilitation Emphasis the degree of emphasis placed on rehabilitation of the participants compared to other court functions, such as case processing and punishment, including collaborative decision-making, attention to multiple participant needs, court-session dynamics, limited adversarial interactions and positive reinforcements, and graduated sanctions

Evolution of the Drug Court Model.

The drug court model began as a method of dealing more effectively and expeditiously with adults charged with first-time drug possession. Rather quickly the courts found the initial admission criteria to be too restrictive, as offenders with clear drug dependence whose crimes were substantially correlated with this addiction, showed promise of better outcomes through being allowed to participate in the drug court. Increased court oversight combined with meaningful and mandated treatment resulted in better community protection, lower justice system costs and better outcomes for participants, including return to productive, responsible, tax-paying lives. From the initial focus, the drug court model has evolved to provide a more effective judicial response to other types of cases.

Juvenile drug courts address the multiplicity of needs of the juvenile offender with substance abuse or dependence. The engagement of the court system has provided a useful focus for comprehensive, well orchestrated, and strongly accountable interagency collaboration to address both the needs of the child and of the family. Juvenile drug courts also use the court's contempt power to mandate parental involvement in needed family support and rehabilitative services. In some jurisdictions, the treatment services provided can actually go into the home to provide family intervention.

In many child protection cases, substance dependence makes meeting parenting responsibilities impossible. Typically these cases result in costly and traumatic out-of-home placement for the children. They increasingly can end in termination of parental rights and permanent removal of children from their parents, under the strict timelines of the Adoption and Safe Families Act. Family or Child Protection drug courts have shown promise in achieving effective reunification of families as parental substance dependence is effectively addressed through the drug court treatment model.

Finally, the drug court model is being used to address the needs of the mentally ill offender. Such offenders are often poorly suited to incarceration or to traditional case processing, but community treatment limitations make their continued engagement in treatment hard to maintain. Many of these mentally ill offenders also are alcohol or other drug dependent, compounding their problems and leading to substantial recidivism. The participation in the drug court model has shown promise to more effectively maintain treatment compliance and crime-free, community living for these individuals.

APPENDIX A.

NATIONAL DRUG COURT GUIDANCE

Ten Key Components of Drug Courts - National Drug Court Institute.

The incorporation of and adherence to the following core principles and practices is essential to drug courts.

1. Drug courts integrate alcohol and other drug treatment services with justice system case processing.
2. Using a non-adversarial approach, prosecution and defense counsel promote public safety while protecting participants' due process rights.
3. Eligible participants are identified early and promptly placed in the drug court program.
4. Drug courts provide access to a continuum of alcohol, drug, and other related treatment and rehabilitation services.
5. Abstinence is monitored by frequent alcohol and other drug testing.
6. A coordinated strategy governs drug court responses to participants' compliance.
7. Ongoing judicial interaction with each drug court participant is essential.
8. Monitoring and evaluation measure the achievement of program goals and gauge effectiveness.
9. Continuing interdisciplinary education promotes effective drug court planning, implementation, and operations.
10. Forging partnerships among drug courts, public agencies, and community-based organizations generates local support and enhances drug court effectiveness.

Policy Considerations - Department of Justice.

In addition to the *Ten Key Components* the Department of Justice has published the following guidance to drug courts for system development and planning consideration.

1. Drug courts should establish and formalize more effective linkages with local service delivery systems and State and local alcohol and drug agencies.
2. States and localities should explore the development of drug court treatment standards.
3. Drug court professionals and drug court treatment providers need skill-based training and technical assistance to improve engagement and retention of participants.

4. Drug courts should improve the methods and protocols for screening, assessing, and placing participants in treatment.
5. Drug courts should implement effective management information systems to monitor program activity and improve operations.
6. To achieve greater impact within the communities they serve, drug courts should strive to expand capacity and demonstrate that they are integral to the justice and substance abuse treatment systems.

APPENDIX B.

PRINCIPLES OF DRUG ADDICTION TREATMENT

National Institute on Drug Abuse

1. No single treatment is appropriate for all individuals.
2. Treatment needs to be readily available.
3. Effective treatment attends to multiple needs of the individual, not just his or her drug use.
4. An individual's treatment and services plan must be assessed continually and modified as necessary to ensure that the plan meets the person's changing needs.
5. Remaining in treatment for an adequate period is critical for treatment effectiveness.
6. Counseling (individual and/or group) and other behavioral therapies are critical components of effective treatment for addiction.
7. Medications are an important element of treatment for many patients, especially when combined with counseling and other behavioral therapies.
8. Addicted or drug-abusing individuals with coexisting mental disorders should have integrated treatment for both.
9. Medical detoxification is only the first stage of addiction treatment and by itself does little to change long-term drug use.
10. Treatment does not need to be voluntary to be effective.
11. Possible drug use during treatment must be monitored continuously.
12. Treatment programs should provide assessment for HIV/AIDS, hepatitis B and C, tuberculosis, and other infectious diseases and counseling to help patients modify or change behaviors that place themselves or others at risk of infection.
13. Recovery from drug addiction can be a long-term process and frequently requires multiple episodes of treatment.

APPENDIX C.
FIRST ANNUAL IDAHO
DRUG COURT INSTITUTE AGENDA

IDAHO DRUG COURT INSTITUTE
September 11 -13, 2002
Shilo Inn ~ Idaho Falls, ID
AGENDA

WEDNESDAY, SEPTEMBER 11TH

8:00 am **Breakfast Served**

Freshly baked muffins, donuts and danishes, fruit tray and juices, coffee, tea, hot cocoa and hot apple cider

8:15 am **General Session**

WELCOME AND INTRODUCTIONS — Convention Center

Justice Daniel Eismann

**A. Chair, Drug Court
Coordinating Committee**

Hon. Gregory Culet

**District Judge, Third Judicial District,
Institute Chair**

**ADDICTIONS: FACTS AND FICTIONS — WHY
DRUG COURTS WORK - Convention Center**

Michael Nerney

Michael Nerney and Associates, NY

*Introduction: Hon. Larry Duff, Magistrate
Judge, Minidoka County*

The presenter will describe new research that delineates the structural and functional changes that take place in the brain as a person becomes chemically dependent. These new findings have convinced the National Institute of Drug Abuse to describe chemical dependency as a "disease of the brain". In the face of such changes, treatment has often been marginally successful. With the proper mix of teamwork and resources, drug courts can have a tremendous positive impact.

Host: Sharon Burke

10:15 am **Break – Visit the Exhibits**

WEDNESDAY, SEPTEMBER 11TH

10:30 am **Breakout Sessions**

**1. TARGETING, ELIGIBILITY,
SCREENING AND ASSESSMENT –**

Pocatello / Idaho Room

Carson Fox, Fellow

National Drug Court Institute

*Introduction: Patrick Owen, Prosecuting
Attorney, Ada County*

The presenter will define target population, how it is determined and discuss eligibility criteria and guidelines. Statutory, financial and political concerns will be considered as well as legal screening techniques. The process for screening and entry in to drug courts will be explored. (Session also offered on Thursday)

Host: Corrie Keller

**2. EFFECTIVE TREATMENT AND
MANAGEMENT WITH DUI
OFFENDERS — TWIN FALLS ROOM**

Hon. Mike Kavanaugh

Drug Court Judge

New Mexico State Courts

*Introduction: Hon. Mark Beebe, Magistrate
Judge, Power County*

Despite severe penalties, problem drinkers who go untreated continue to drink and drive, tie up court systems and kill people on highways. Based on the drug court model, DUI drug courts apply the same treatment, structure and accountability to the repeat DUI Offender as traditional drug courts provide to repeat drug offenders. Learn about DUI and Misdemeanor Drug Court strategies in this session.

3. Host: Sharon Burke

WEDNESDAY, SEPTEMBER 11TH

10:30 am Breakout Sessions (Continued)

**4. RELAPSE PREVENTION AND
ADOLESCENT ISSUES — Boise Room**

Michael Nerney
Michael Nerney and Associates, NY

*Introduction: Hon. Larry Duff, Magistrate
Judge, Minidoka County*

In spite of advances in treatment techniques and models, relapse rates remain unacceptably high, especially among adolescents. In order to address this problem, counselors and other professionals must understand relapse as a process, learn specific relapse prevention techniques, and integrate this information with an understanding of the adolescent brain and development.

Host: Peggy Dougherty

**5. INTEGRATED TREATMENT FOR THE
SUBSTANCE ABUSING OFFENDER —
River View / Temple View Room**

*Norma D. Jaeger, Statewide Drug Court
Coordinator*

*Ginger Martin, Administrator, Community
Corrections Division*

Offenders who are dependent on alcohol or other drugs can be understood as having a co-occurring disorder. Research has identified treatment principles and practices that lead to better outcomes. This session will explore these research findings and provide guidelines for integrating treatment to address both criminality and addiction.

Host: Tammy Brown

12:00 PM Lunch — Chicken Penne Pasta

CULTURAL COMPETENCY — YELLOWSTONE/TETON ROOM

Hon. Mike Kavanaugh
Drug Court Judge, New Mexico State Courts

*Introduction: Hon. Mark Beebe, Magistrate
Judge, Power County*

Drug Courts serve a very diverse group of people. In order to best meet your clients' needs, it is critical for drug court practitioners to understand different cultures

WEDNESDAY, SEPTEMBER 11TH

and especially recognize differences in value systems and mores among various racial, socioeconomic and ethnic groups.

Host: Sharon Burke

1:30 pm Breakout Sessions

**DRUG TESTS AND MONITORING FOR ADULT DRUG
COURT — CONVENTION CENTER**

Paul Cary, Director
Toxicology Laboratory
University of Missouri

*Introduction: Burt Butler, Trial Court
Administrator, Seventh Judicial District*

The presenter will discuss some basic concepts about drug testing and the varying drug testing methodologies. He will present challenging collection strategies and explain interpreting drug testing results both in the scientific and lay environment. He will discuss specimen tampering. In addition, the presenter will answer questions & dispel myths about drug testing.

Host: Sharon Burke

**ADOLESCENT BRAIN DEVELOPMENT — RIVER
VIEW/TEMPLE VIEW ROOM**

Michael Nerney
Michael Nerney and Associates, NY

*Introduction: Hon. Larry Duff, Magistrate
Judge, Minidoka County*

Recent research indicates that the timeframe from 14 year to 24 years of age is exceptionally risky. New insights into brain development, gained through the use of new technology, demonstrate specific conditions that exist in the brain only during adolescence. Linking this research to the stages of adolescent development has generated better understanding of the way in which adolescents perceive the world, themselves, and their behaviors.

Host: Peggy Dougherty

3:00 pm Break ~ Visit the Exhibits

Cookies, Double Fudge Brownies and Soft Drinks

WEDNESDAY, SEPTEMBER 11TH

3:15 pm Breakout Sessions

**PRO-SOCIAL SKILLS - EDUCATION AND
EMPLOYMENT RESOURCES — POCATELLO ROOM**

*Barbara Case, Learning Center for Adult Basic
Education
Matt Brady, Rehabilitation Counselor, IDVR*

*The presenters will provide information on the services
of both the Learning Center for Adult Basic Education
and Vocational Rehabilitation in the state, both key
components of case management in drug court.*

Host: Debra McKnight

**ENHANCING FUNDING AND BUILDING
COMMUNITY SUPPORT — IDAHO ROOM**

*Tanya Gomez, Drug Court Coordinator
Kootenai County Drug Court*

*Hon. Eugene Marano and Tanya Gomez, Kootenai
County Drug Court, have developed a presentation to
educate community leaders on the value of drug courts,
building support and enhancing funding opportunities.
The presenter will show the presentation and provide
ideas and strategies for utilizing this tool in other
communities.*

Host: Peggy Dougherty

**DRUG TESTS AND MONITORING FOR JUVENILES —
QUESTIONS AND ANSWER — RIVER VIEW/TEMPLE VIEW
ROOM**

*Paul Cary, Director
Toxicology Laboratory
University of Missouri*

*Introduction: Burt Butler, Trial Court
Administrator, Seventh Judicial District*

*The presenter will discuss basic concepts and
methodologies of drug testing as in the prior Adult Drug
Testing session. This session will focus on drug testing in
juvenile drug courts.*

HOST: CORRIE KELLER

WEDNESDAY, SEPTEMBER 11TH

3:15 pm Breakout Sessions (Continued)

**THE CHALLENGES AND TRIUMPHS OF WORKING
WITH WOMEN/GIRLS — TWIN FALLS**

*Susan James-Andrews
James-Andrews and Associates
Introduction: Hon. Bryan Murray,
Magistrate Judge, Bannock County*

*Treatment tailored to help females with specific needs is
critical to the recovery process. Being aware of the
different cultural/poverty issues and knowing how to
address them is equally important to the rehabilitation
process. This session will educate on effective
treatment methods for the female offender.*

Host: Sharon Burke

**ORGANIZING AND SUSTAINING A DRUG COURT
ALUMNI GROUP —**

*Marreen Baker, Ada County
Drug Court Coordinator
Brian Curry, CSC Facilitator*

*The presenters will describe the process of establishing
and operating an alumni group based on their experience
in Ada County.*

Host: Norma Jaeger

4:15 pm Break

4:30 pm Breakout by Roles

*These breakouts will allow drug court practitioners an
opportunity to discuss challenges and exchange ideas
with others in their role.*

Judges ~ Judge Brent Moss, Facilitator
Pocatello Room Host: Patti Tobias

Coordinators ~ Norma Jaeger, Facilitator
Twin Falls Room Host: Sharon Burke

Prosecutors ~ Carson Fox, Facilitator
Idaho Falls Room Host: Sharon Burke

Public Defenders ~ Linda Wright, Facilitator
Temple View Room Host: Peggy Dougherty

Treatment ~ Corrie Keller, Facilitator
Boise Room Host: Peggy Dougherty

Probation ~ Suzanne Johnson, Facilitator
Grand Teton Room Host: Debra McKnight

Law Enforcement ~ Burt Butler, Facilitator
River Room Host: Debra McKnight

5:30 pm Adjourn

THURSDAY, SEPTEMBER 12TH

8:00 am Breakfast

Freshly baked muffins, donuts and danishes, freshly sliced seasonal fruit tray and chilled juices, coffee, tea, hot cocoa and hot apple cider

8:30am General Session

RETHINKING COURT RESPONSES TO CLIENT BEHAVIOR: SANCTIONS AND INCENTIVES – Convention Center

Hon. Bill Meyer

NDCI Fellow

Denver, CO

Introduction: Hon. Greg Culet, District Judge, Third District

This session will describe how and why scientific research should impact your decisions in imposing incentives and sanctions.

Host: Sharon Burke

10:00 am Break ~ Visit the Exhibits

10:15 am Breakout Sessions

ASSESSMENT AND TREATMENT PLANNING IN ADULT DRUG COURT – IDAHO ROOM

*Ken Osborne, Regional Director
Cornell Companies*

Introduction: Marreen Baker, Drug Court Coordinator, Ada County

The presenter will discuss the goals of treatment and define what treatment is supposed to accomplish. He will discuss the assessment tools utilized to design treatment, components of treatment and explore treatment modalities. The presenter will outline basic treatment interventions as well as introduce enhanced treatment intervention techniques.

Host: Norma Jaeger

THURSDAY, SEPTEMBER 12TH

10:15 am Breakout Sessions (continued)

TARGETING, ELIGIBILITY, SCREENING AND ASSESSMENT – TWIN FALLS ROOM

Carson Fox, Fellow

National Drug Court Institute

Introduction: Patrick Owen, Prosecuting Attorney, Ada County

The presenter will define target population, how it is determined and discuss eligibility criteria and guidelines. Statutory, financial and political concerns will be considered as well as legal screening techniques. The process for screening and entry in to drug courts will be explored.

Host: Sharon Burke

ENGAGING THE FAMILY IN JUVENILE DRUG COURT- BOISE ROOM

Susan James-Andrews

James-Andrews and Associates

Introduction: Hon. Bryan Murray, Magistrate Judge, Bannock County

This session reviews the roles of families in crisis and how having an active substance abuser creates challenges for families in recovery in drug court. Concepts of engaging families from a cultural perspective, challenges of single parenting/parenting and parental substance abuse, are explored to assist in strategizing ways to engage the family.

Host: Debra McKnight

JUDICIAL STYLES AND ENVIRONMENT – POCATELLO ROOM

Hon. Bill Meyer

NDCI Fellow, Denver, CO

Introduction: Hon. Brent Moss, District Judge, Seventh Judicial District

Different styles, approaches and courtroom environmental factors can be effective in working with drug court participants. Identify certain elements used in successful drug courts that you can integrate into your style.

Host: Peggy Dougherty

THURSDAY, SEPTEMBER 12TH

10:15 am Breakout Sessions (continued)

EVALUATING IDAHO' S DRUG COURTS — RIVER VIEW/TEMPLE VIEW ROOM

*Shelley Johnson Listwan
Criminal Justice Department
University of Nevada Las Vegas*

Introduction: Corrie Keller, Director of Court Services

The presenter will provide an overview of the purpose and components of an evaluation. She will discuss the research questions in the drug court evaluation, the importance of comparison groups and data collection and describe potential impediments to a successful evaluation. She will detail the components of Idaho's evaluation strategy and answer questions about the process and paperwork.

Host: Corrie Keller

12:00pm Lunch — Cascade Club Sandwiches

1:30 pm General Session

CO-OCCURRING DISORDERS - AN INTEGRATED TREATMENT APPROACH — Convention Center

*Gary Field, Program Administrator,
Counseling and Treatment Services,
Oregon Department of Corrections,*

Introduction: Linda Polhemus, Drug Court Coordinator, Canyon County Drug Court

Differences in treatment philosophies and restrictions in funding between substance abuse and mental health service systems as well as the complexity of co-occurring disorders, create special challenges for drug courts. Learn strategies to effectively treat those individuals with co-occurring mental health and substance abuse issues.

Host: Sharon Burke

3:00 pm Break

Cookies, Double Fudge Brownies and Soft Drinks

THURSDAY, SEPTEMBER 12TH

3:15 pm Breakout Sessions

RELAPSE PREVENTION AND AFTERCARE IN ADULT DRUG COURT: MAINTAINING THE GAINS —

POCATELLO/IDAHO ROOM

*Ken Osborne, Regional Director
Cornell Companies*

Introduction: Marreen Baker, Drug Court Coordinator, Ada County Drug Court

This session will enhance therapeutic jurisprudence and the understanding of the dynamics surrounding relapse prevention for Drug Court teams, criminal justice, treatment, political and other professionals decision makers. The presenter will define and discuss the theoretical basis of relapse, the biopsychosocial model of addiction and criminal personality disorder, the dynamics surrounding the relapse incident and the appropriate systematic responses and prevention strategies.

Host: Sharon Burke

ASSESSMENT AND CASE PLANS IN JUVENILE DRUG COURT: A STRENGTH-BASED APPROACH — BOISE ROOM

*Susan James- Andrews
James-Andrews and Associates*

*Introduction: Hon. Bryan Murray,
Magistrate Judge, Bannock County*

This session encourages drug courts to include as a component of their assessment process a strength perspective on a continuous basis with the participant and their family. It further explores the challenges of "case management", from a clinical and probationary perspective, and discusses strategies to incorporate within your system.

Host: Corrie Keller

THURSDAY, SEPTEMBER 12TH

3:15 pm Breakout Sessions (Continued)

CRITICAL COMPONENTS AND PRACTICES FOR NEW DRUG COURTS — TWIN FALLS ROOM

*Carson Fox, Fellow
National Drug Court Institute*

*Introduction: Patrick Owen, Prosecuting
Attorney, Ada County*

This session will focus on the new drug courts. The presenter will describe the Department of Justice's Ten Key Components for Drug Courts, define team membership, types and models of drug courts and explain the drug court process. The presenter will help new teams determine a target population, provide ideas to gain community support and discuss funding options.

Host: Peggy Dougherty

EVALUATING IDAHO'S DRUG COURTS — RIVER VIEW/TEMPLE VIEW ROOM

*Shelley Johnson Listwan
Criminal Justice Department
University of Nevada Las Vegas*

*Introduction: Norma Jaeger, Statewide Drug
Court Coordinator*

The presenter will provide an overview of the purpose and components of an evaluation. She will discuss the research questions in the drug court evaluation, the importance of comparison groups and data collection and describe potential impediments to a successful evaluation. She will detail the components of Idaho's evaluation strategy and answer questions about the process and paperwork.

Host: Norma Jaeger

4:45 pm ADJOURN

FRIDAY, SEPTEMBER 13TH

8:15 am Breakfast with Legislators

THE PROMISE OF DRUG COURTS - Convention Center

*West Huddleston, Director
National Drug Court Institute*

The Director of the National Drug Court Institute will present the national perspective and the promise of drug courts in successfully treating the drug addicted offender.

Host: Sharon Burke

IN OUR EXPERIENCE ~ GRADUATES AND FAMILIES SPEAK OUT

Hon. Keith Walker will introduce graduates from his drug court and moderate a discussion of their experience in drug court.

APPLYING "WHAT WORKS" TO DRUG COURTS

*Dr. Edward J. Latessa, Criminal Justice
Department, University of Cincinnati*

This session will focus on what the characteristics are of an effective drug court, applying what we know from research on substance abuse and drug courts; what makes a drug court effective in intervention and how to successfully reduce recidivism among offenders.

CLOSING REMARKS

*Justice Eismann, Chair, Drug Court Coordinating
Committee*

11:45 am ADJOURN ~ Have a safe trip home!!

APPENDIX D.

ORDER RECOGNIZING IDAHO DRUG COURTS

Idaho Drug Court Week November 10 - 16, 2002

IN RE: DRUG COURTS

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ORDER

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WHEREAS, all three branches of Idaho government – Executive, Legislative and Judicial – have come together to reverse the upward trend of drug related crime, and;

WHEREAS, the Idaho Legislature found that substance abuse is a contributing cause for much of the crime in Idaho, costing millions of dollars, contributing to the ever increasing jail and prison populations, and adversely impacting Idaho children, and;

WHEREAS, the Idaho Drug Court Act, as recommended by the Idaho courts and endorsed by Governor Kempthorne, was enacted by the Idaho Legislature in 2000, to reduce the overcrowding of jails and prisons, reduce alcohol and drug abuse and dependency among criminal and juvenile offenders, and to promote effective interaction and use of resources among the courts, justice system personnel, and community agencies, and;

WHEREAS, Drug Courts in Idaho hold alcohol or other drug involved offenders clearly accountable for their criminal behavior, while also providing effective treatment, drug testing, and rehabilitation, and;

WHEREAS, research has shown that effective treatment can reduce future criminal offenses and the victimization related to such crimes, and;

WHEREAS, Idaho's Drug Courts provide an alternative to imprisonment, and an option to costly prison expansion, and;

WHEREAS, 28 drug courts are now operating, supervising over 600 offenders, in every judicial district of the state, and;

WHEREAS, national evaluation studies, have demonstrated that Drug Courts can reduce criminal offenses while saving substantially more than their operational costs, and;

WHEREAS, across the state, Idaho's Drug Courts are providing effective community supervision of participants while providing the treatment, drug testing, and rehabilitation necessary to restore them to drug free, productive, and tax-paying lives, and

NOW, THEREFORE, BE IT RESOLVED, that Idaho's Drug Courts be recognized for their significant accomplishments in each jurisdiction, and that the value of these courts be conveyed to the citizens of Idaho.

Dated this __18th__ day of ____November_____, 2002.

ATTEST:

By Order of the Supreme Court

_____/s/_____
Frederick C. Lyon, Clerk

_____/S/_____
Linda Copple Trout, Chief Justice

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- Dickey, W.J., (2001) *Community Justice in Rural America – Four Examples and Four Futures*. Washington, D.C., U.S. Department of Justice.
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- Defining Drug Courts: The Key Components.** U.S. Department of Justice, Office of Justice Programs, Drug Courts Program Office.
- Drug Court Publications Resource Guide (2002)** National Drug Court Institute, National Association of Drug Court Professionals.
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- Treatment Services in Adult Drug Courts: Report on the 1999 National Drug Court Treatment Survey** published by the US Department of Justice, Office of Justice Programs, Drug Courts Program Office.